

LEGISLATIVE HEARING ON H.R. 2018, H.R. 2088,
H.R. 2119, H.R. 2529, H.R. 3671, H.R. 3876, H.R.
4095, H.R. 4102, H.R. 4141, AND H.R. 4191

HEARING

BEFORE THE

SUBCOMMITTEE ON DISABILITY
ASSISTANCE AND MEMORIAL AFFAIRS

OF THE

COMMITTEE ON VETERANS' AFFAIRS
U.S. HOUSE OF REPRESENTATIVES

ONE HUNDRED THIRTEENTH CONGRESS

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LEGISLATIVE HEARING ON H.R. 3593, H.R. 4261, H.R. 4281 AND OTHER DRAFT LEGISLATION

Wednesday, March 26, 2014

U.S. HOUSE OF REPRESENTATIVES,
COMMITTEE ON VETERANS' AFFAIRS,
SUBCOMMITTEE ON DISABILITY ASSISTANCE AND
MEMORIAL AFFAIRS,
Washington, D.C.

The subcommittee met, pursuant to notice, at 3:40 p.m., in Room 334, Cannon House Office Building, Hon. Jon Runyan [chairman of the subcommittee] presiding.

Present: Representatives Runyan, Lamborn, Bilirakis, Miller, Titus, O'Rourke, Ruiz, Negrete McLeod, and Michaud.

OPENING STATEMENT OF CHAIRMAN JON RUNYAN

Mr. RUNYAN. Good afternoon. This legislative hearing on H.R. 2018, H.R. 2088, H.R. 2119, H.R. 2529, H.R. 3671, H.R. 3876, H.R. 4095, H.R. 4102, H.R. 4141, and H.R. 4191 will now come to order.

Today we have a large number of witnesses present due to the number of bills and a high level of interest in some of these bills before us. Without any objection, the written testimony of all appearing today will be made part of the hearing record.

However, the House also is scheduled for some more votes this afternoon, so in the interest of time, there will be no questions for our first panel, which is comprised of Members of Congress who are here to speak on their bills. Subsequent panels two, three, and four will not be asked to give an opening statement today, but we will begin questions and responses immediately upon their introduction. Each testifier's full written testimony will be submitted for the record.

Also in the interest of time, I am going to forego a lengthy opening statement and just briefly touch on one of the bills on today's agenda, which I am proud to introduce: H.R. 4095, the Veterans' Compensation Cost-of-Living Adjustment, or COLA, Act of 2014, which provides a cost-of-living adjustment increase to veterans' disability compensation rates and other benefits.

The amount of increase will be determined by the Consumer Price Index, which also controls the cost-of-living adjustment for Social Security beneficiaries.

As many of us here today know, the cost-of-living increase is beneficial to the veterans and their families who depend on VA benefits to make ends meet.

Although I am very supportive of this annual legislation, I would like to once again state that it is unfortunate that we have to pass such a bill each year and would encourage our colleagues in the Senate to pass H.R. 570, the American Heroes COLA Act legislation, which authorized an annual COLA without requiring congressional action. This would ensure that the veterans' COLA is not tied to political action, nor inaction, in Washington.

I appreciate everyone's attendance here today and will now call on the ranking member for her opening statement.

[THE PREPARED STATEMENT OF JON RUNYAN APPEARS IN THE APPENDIX]

OPENING STATEMENT OF DINA TITUS, RANKING MEMBER

Ms. TITUS. Thank you, Mr. Chairman. And thank you for having the hearing.

As you said, we are examining ten bills that pertain to issues that are of great importance to our nation's veterans and to those in this room. I support a number of these bills.

First, I would like to say that I am proud to have worked with the chairman to introduce H.R. 4095 and H.R. 570 which deals with the veterans' compensation cost-of-living adjustments for 2014. Like you, I wish we could make this permanent, but in the short term we certainly need to raise the compensation for this year. It is simply the right thing to do, and I thank you for that.

Also on today's agenda is H.R. 2088, which is introduced by our ranking member of the full committee, Mr. Michaud, and which would create claims-processing centers of excellence. With the ranking member here to discuss his bill, I will defer to him to outline the legislation. But I want to say I fully support this legislation and believe that it will build on the VA's successes to date fighting the backlog.

H.R. 2119, the Veterans Access to Speedy Review Act, is brought forth by Dr. Ruiz, a member of our subcommittee. His legislation seeks to address the appeals backlog, which we know is a high priority for this committee. It would allow the Board of Veterans' Appeals to select the quickest way to schedule hearings for our veterans. He is here to speak to this.

Also, H.R. 2529, the Veteran Spouses Equal Treatment Act, would clarify the definition of "spouse" for the purpose of receiving VA benefits. It would include all spouses in any legally recognized marriage with a veteran in any State of the United States and its territories and possessions.

The purpose of the legislation is to bring the VA in compliance with the Department of Defense and other Federal agencies to ensure that all veterans and their families are receiving the benefits they have earned throughout their military service. Unfortunately, current law precludes some veterans from receiving the benefits that they have earned. I believe this is a commonsense approach, and I hope we can move the bill to the floor as quickly as possible.

So I thank all of our members and our colleagues for bringing forward their thoughtful legislation to help veterans. I thank our esteemed witnesses who have come today to give us some insight and answer our questions about this proposed legislation.

Thank you, and I yield back, Mr. Chairman.

[THE PREPARED STATEMENT OF DINA TITUS APPEARS IN THE APPENDIX]

Mr. RUNYAN. I thank the ranking member.

With that, I would like to recognize Chairman Miller of the full committee for an opening statement.

OPENING STATEMENT OF CHAIRMAN JEFF MILLER

Mr. MILLER. Thank you very much, Mr. Chairman, for yielding. I want to make a few remarks on two bills that I have introduced, H.R. 3671 and H.R. 4102.

First of all, H.R. 3671 expands the eligibility for a medallion furnished by the Secretary of Veterans Affairs, which would signify that the veteran has veteran status of a deceased individual upon a private headstone or a marker.

Currently, VA has the authority to furnish, upon request, a medallion for eligible veterans who died on or about the 1st of November of 1990. H.R. 3671 would remove the date-of-death limitation by codifying eligibility for the medallion benefit regardless of the veteran's date of death.

For nearly 40 years now, VA has administered various programs to provide headstones or marker options for veterans. At times there have been allowances for private headstones, and at times those allowances were not provided for. The programs have evolved over time, and that evolution is somewhat confusing for veterans and their loved ones.

Some view the current November 1st, 1990, date as an arbitrary qualification for the medallion, but, in fact, this 1990 date was not arbitrary at all. It was delineated as a starting point for the medallion benefits because from November 1st of 1990 through the 1st of September of 2001 VA did not pay a benefit for the purchase of a private headstone or marker for a veteran who was qualified for interment in a national or State veterans cemetery. However, in a 2001 through 2006 pilot program, VA provided government headstones or markers to eligible veterans regardless of whether or not they had privately purchased a headstone, and in 2007 VA actually made this program permanent.

At that time, VA included a medallion as an alternative option, retroactive to the 1st of November of 1990. The medallion has proven to be very much appreciated by veterans and their families, and VA is supportive of the change to allow this option for more veterans. Accordingly, I would like to encourage all of you to support the broadened eligibility that is contained within H.R. 3671.

And then, additionally, I want to highlight to your attention H.R. 4102, which I have introduced along with Representative Walorski to clarify that the estate of a deceased veteran may receive certain accrued benefits upon the death of the veteran and for other purposes.

This bill corrects a grave injustice that has resulted from the tremendous backlogs existing within the Veterans Benefits Administration and will prevent the occurrence of future incidents. The fact is that unacceptable wait times at the VBA regional offices have contributed to tens of thousands of veterans dying before their benefits are granted.

While VBA currently reports an average days-to-complete figure of 285 days, I recall that we are not long removed from the agency's 2-year-old claims initiative, which focused on rating claims that had been pending for over 700 days.

And, as to appealed claims, while the Board of Veterans' Appeals chairman's report for fiscal year 2013 has not yet been approved or provided to Congress, we can anticipate a grim account, as veterans' appeals continue to rise unresolved for 3, 4, or more years.

Now, under current law, only a veteran's spouse or children under the age of 18 and dependent parents are eligible to receive accrued disability benefits in the death of a veteran claimant's death. H.R. 4102 would provide another option for payment into the veteran's estate.

To demonstrate the need for this bill, I highlight the experience of Indianapolis veteran Shelton Hickerson and his daughter, Sharon Hickerson Thurman. In 2000, Mr. Hickerson filed a claim for disability benefits. VA denied the claim, and Mr. Hickerson's appellate process began. Ultimately, on June 27th, 2013, after more than 10 years, VA awarded Mr. Hickerson a 100 percent disability rating with retroactive pay in excess of \$375,000. But, sadly, Mr. Hickerson passed away the same day as the payment of the benefit.

Mr. Hickerson was entitled to this compensation, and had he lived just 1 day—1 day—longer, he would have been able to deposit that accrued benefit properly into his account. However, he did not. And his daughter was not eligible to receive the accrued benefit because she was no longer a dependent. VA's errant and dilatory processing of Mr. Hickerson's claim resulted in no benefit to Mr. Hickerson, to his estate, and, therefore, his family received nothing.

There is no doubt in my mind that VA will make mistakes in its claims-rating process. However, the party to the transaction that pays a price for these mistakes should not be the veteran or the families of those lives who are also affected by illness or injury caused by their service.

So I want to encourage all of you to support H.R. 4102, a bill to clarify that the estate of deceased veterans may receive accrued benefits upon the death of the veteran and to provide relief in the case of Mr. Shelton Hickerson.

Mr. Chairman, thank you for your time. I yield back.

[THE PREPARED STATEMENT OF JEFF MILLER APPEARS IN THE APPENDIX]

Mr. RUNYAN. Thank you, Chairman.

With that, I will recognize the ranking member of the full committee, Mr. Michaud, for an opening statement.

OPENING STATEMENT OF MICHAEL MICHAUD, RANKING MEMBER

Mr. MICHAUD. Thank you very much, Mr. Chairman and Madam Ranking Member. I am here to testify on H.R. 2088.

Today's veterans are filing the most complex claims in history, with the trend continuing towards an increase in complexities. These claims take longer, require more training and additional

oversight to properly adjudicate a TBI claim than a loss-of-hearing type of claim.

My bill seeks to replicate the success that the VA has had with specializing claims related to Camp Lejeune and atomic veterans. VA suggests that the centralization and specialization of these claims has allowed them to increase training and mastery of these complex conditions, thereby increasing timeliness and accuracy of the adjudication.

The VA OIG recently noted in their inspection of VA regional offices that 31 percent of TBI claims reviewed showed that staff had made errors. After informing the staff of the errors and VA taking action, the VA OIG returned and noted that 29 percent of the TBI claims reviewed were still found to be in error.

I believe that my legislation provides a commonsense solution that will result in veterans with complex medical conditions having their complex condition adjudicated at a VA center of excellence by a specialist who has been trained to adjudicate these specific claim conditions.

We must continue to work towards and achieve a claims system that lives up to the service and sacrifice of our veterans so that no veterans will end up in a situation that you just heard from Chairman Miller, with that veteran and their family.

And with that, Mr. Chairman, I yield back.

[THE PREPARED STATEMENT OF MICHAEL MICHAUD APPEARS IN THE APPENDIX]

Mr. RUNYAN. Thank the gentleman.

I know Mr. Ruiz wants to make a statement. Is there anyone else that wants to make an opening statement?

So, with that, the chair recognizes Mr. Ruiz for his statement.

OPENING STATEMENT OF HON. RAUL RUIZ

Mr. RUIZ. Thank you very much, Mr. Chairman, for holding this legislative hearing. The bills we will be discussing today serve as a testament to our committee's dedication to the honorable men and women who have served our country.

I thank the chairman for including my bill, H.R. 2119, the Veterans Access to Speedy Review Act, in the legislative hearing today. My bill seeks to address the appeals backlog by increasing the use of videoconferencing during an appeals hearing as a substitute for the veteran being there in person.

This bill intends to relieve the burden on veterans' having to travel for VA appeal hearings in person. Many times, this travel comes at a great physical and financial cost to the veteran. This bill is also focused on making the VA appeals process as efficient as possible in order to reduce the appeals backlog and create a more speedy review process.

In working with veterans service organizations, we have found ways to improve the language of the bill to ensure it meets its intended purpose. I really do thank the VSOs, my veterans advisory group, and the veterans in my district for their input. This is really their creation.

I appreciate the chairman's willingness to include this bill in today's legislative hearing, and I look forward to working together to move this legislation forward.

Thank you, and I yield back my time.

Mr. RUNYAN. Thank you.

And, at this time, I would like to welcome my colleagues in the House to the witness table for our first panel.

First, we will hear from the Honorable Al Green from Texas, who is sponsoring H.R. 3876. Next, we will hear from the Honorable Tim Walz from Minnesota, who is sponsoring H.R. 4191. Then, we will hear from the Honorable Jeff Denham from California, who is an original cosponsor of H.R. 4191. And, finally, we will hear from the Honorable Steve Stivers from Ohio, who is sponsoring H.R. 2018.

Additionally, Honorable Ander Crenshaw from Florida is sponsoring H.R. 4141. He is unable to attend this afternoon, as he is chairing the Financial Services Subcommittee of Appropriations currently. Noting that, his full written testimony will be included in the hearing record.

[THE PREPARED STATEMENT OF ANDER CRENSHAW APPEARS IN THE APPENDIX]

Mr. RUNYAN. I would like to welcome all of you to this legislative hearing. All of your complete and written statements will be entered into the hearing record.

And, with that, Congressman Green, we will start with you, and you are now recognized for 5 minutes for your testimony.

STATEMENTS OF THE HON. AL GREEN

Mr. GREEN. Thank you, Mr. Chairman. I thank the ranking member, as well, the full committee chair, and the full committee ranking member.

And I am somewhat moved, to be quite candid with you, by the comments about the Hickerson family, so I have to digress. It would be unlike me to let this go by and not say something. It pulls at my heart to know that a family is not in a position to receive something that has been earned. And I just don't know how to express my feelings about that other than to say, you didn't ask me, but that is something that I would support, this piece of legislation.

All of the legislation that I have heard spoken of appears to be legislation that would greatly benefit our veterans. I am just pleased that I came to hear what I have heard so far. So thank you for this.

I would like to start with a brief vignette that will give some indication as to why I feel the way I do about our veterans. I was in another State and lost, looking for a given venue. When I couldn't find it, I happened to look over my right shoulder, and there was a VA facility there. And there was a sign that read, "Come in and see the price of freedom." "Come in and see the price of freedom." And you and I know that the price of freedom is more than gold and silver. It can be an arm, a leg, or possibly someone not returning home at all.

This is why we are concerned, and this is why we call to the attention of this body of H.R. 3876 that deals with burials with dignity. We want every person who serves our country honorably to have a dignified memorial service.

My hope is, after having talked to the representative from the VFW who is here today, that he and I and others will be able to

work out some language that will be acceptable for this committee to review. Hence, I will not go into a long dissertation about the intricacies of the bill. I will simply say that it provides homeless veterans, those who may die with no money or they may have no relatives to be of assistance to them, to make sure that they get a decent burial.

Other legislation has addressed this. This is not to say that our country is not doing a good job. It is only to say that we believe that we have more to add, so that transportation will be made available to these veterans. And there may be some other things that we are going to work out with the VFW and other friends.

So I want to thank you for allowing me this opportunity to be heard today. I will not consume more of your time than is necessary, but I do believe that, given what I have heard and how I feel, I want to use just a little bit of my time to ask for a moment of silence for those families who are still having to endure wars, endure pain and suffering because their loved ones didn't return to them the way they left.

This is my request, and I would simply lower my head for a moment of silence.

[Moment of silence observed.]

Mr. GREEN. Amen.

And thank you.

[THE PREPARED STATEMENT OF AL GREEN APPEARS IN THE APPENDIX]

Mr. RUNYAN. Thank you, Congressman Green. And I can tell you, having been on this committee for 4 years working with the VFW through committee staff, we usually come to a very sensible agreement—and get a lot of things done around here, believe it or not, in this committee. So I appreciate your willingness to chat with them and look forward to working with you to get what we can done.

Mr. GREEN. Thank you.

Mr. RUNYAN. Thank you.

With that, I will recognize Congressman Walz.

You are recognized now for 5 minutes for your testimony.

STATEMENT OF THE HON. TIMOTHY J. WALZ

Mr. WALZ. Well, thank you, Chairman Runyan and Ranking Member Titus, and to Chairman Miller and Ranking Member Michaud of the full committee.

I would echo the chairman's comments. It is a singular honor to serve on this committee, and to testify in front of you is humbling and an honor.

I am joined today by a group of young citizens from Waseca High School in Waseca, Minnesota. And I can't imagine a better place to show them how democracy is supposed to work and how we are supposed to work towards solving problems than this committee. So I thank you for that opportunity.

I am also going to be joined and backed up by my friend Mr. Denham, who has been the staunchest supporter of our Nation's veterans. We introduced a piece of legislation to tackle one of the issues. There are so many. As Mr. Green said, so many of these issues are so good and on it.

This issue of the claims backlog, it is corrosive, it is wrong. It wears at the soul of this country, wondering why in the heck we can't deliver these benefits that were earned. And I know that there are good intentions, and I know that we are making progress, and I know that the VSOs who will testify afterwards and the VA officials, that we all want that outcome. But I think there are some good ideas out there.

And I would argue that Mr. Denham, myself, and we have a Senate companion version that has been introduced—and you are going to see support across the board from the VSOs. This is the right thing to do.

This piece of legislation, it is very simple. Our measure would simply allow local doctors to conduct disability medical examinations for veterans. This would conserve VA resources, cuts back on the long wait time at VA hospitals, enables quicker diagnosis of disabilities, and eliminates unnecessary trips to the VA for veterans in rural communities.

Specifically, to further encourage use of private medical evidence, we are amending title 38, United States Code, section 5125 to provide that when a claimant submits private medical evidence, including a private medical opinion, that is competent, credible, probative, and otherwise adequate for rating purposes, the Secretary will not request a VA medical examination.

This legislation would require VSRs and RVSRs to document that private medical evidence was inadequate for rating purposes before ordering the examination, which many times is unnecessary, duplicative, and slows the process down.

The legislation requires the Department of Veterans Affairs to complete two reports for us: a report of 180 days after passage that tracks the implementation and annual reports that track the most common reasons and disabilities for which claims with evidence submitted by non-VA professionals were denied by VBA.

Our goal, and this is very, simple: uphold the promise we made to our veterans by ending the backlog and getting the benefits they earned. We think it is the right way to go. There are folks out there willing to do it. We have a Senate companion version.

You are going to hear from all of the folks who process these on a daily basis—the VSOs, county veteran service officers. And everyone is going to speak in support of this, except for the VA. And I want them to talk to you about this, talk to you about why that is. They know that I am their staunchest supporter, but I will be their harshest critic. Today, I think I come as the latter on the backlog.

With that, I yield back.

[THE PREPARED STATEMENT OF TIMOTHY WALZ APPEARS IN THE APPENDIX]

Mr. RUNYAN. Thank you, Congressman Walz, for that.

And, with that, I will recognize Congressman Denham for his testimony.

STATEMENT OF THE HON. JEFF DENHAM

Mr. DENHAM. Thank you, Chairman Runyan, Ranking Member Titus, Chairman Miller, and Ranking Member Michaud.

Appreciate, as Mr. Walz said, being on this side of the dais and addressing a very important issue, the Quicker Veterans Benefits Delivery Act.

We have talked many times about delivering to veterans and getting rid of this backlog. It is certainly one of the largest goals of the VA, but yet we continue to have discussions on why it is not happening quicker.

This bill is very simple. Just as an example, currently, at the Oakland Regional office of the Veterans Benefits Administration, which serves the veterans in my district, there are over 20,000 pending claims. Twelve thousand of those claims are 125 days or more. Nationwide, by the VA's own count, there are more than 638,000 pending claims; 360,000 of those are over 125 days long.

Secretary Shinseki set the goal of eliminating the disability claim backlog by 2015. And this committee and Congress responded by providing billions in additional funding to improve technology, hire additional staff, and reform the rating process for timelier decisions.

The VSOs were also a vital part of this total effort, working hand-in-hand with the VA to create fully developed a claims process to certify claim packets before they are submitted so they can be swiftly approved.

However, we are skeptical that these initiatives alone will break the backlog by the 2015 stated goal. Congress needs to do more to bolster VA's current efforts to modernize its operations and promote further improvements in order to give veterans' claims-compensation needs to be settled faster.

With that in mind, Congressman Walz and I worked with the veterans service organizations, the VSOs, to draft the Quicker Veterans Benefits Delivery Act. The bill will require the VA to maximize the use of private medical evidence. The bill would allow veterans to see their own doctor instead of waiting for an appointment with VA physicians, who are often overworked or far away from a veteran's home.

Congressman Walz and I both represent rural veterans, many of them elderly, and the challenge of traveling long distances for an appointment is one of the biggest barriers to accessing their veterans benefits. This bill will help remove that hurdle from the benefits claims process.

I would also like to thank, in closing, the VFW, the American Legion, and the Association of United States Navy.

Thank you, and I yield back.

[THE PREPARED STATEMENT OF JEFF DENHAM APPEARS IN THE APPENDIX]

Mr. RUNYAN. Thank you, Congressman Denham.

And, with that, I will recognize Congressman Stivers for his testimony.

STATEMENT OF THE HON. STEVE STIVERS

Mr. STIVERS. Thank you, Chairman Runyan and Ranking Member Titus, as well as Chairman of the Full Committee Miller and Ranking Member Michaud, for holding this hearing today on my bipartisan legislation, H.R. 2018, the Honor Those Who Served Act.

I want to thank Representative Beatty and Representative Tiberi for their help with this bill. The measure before the committee today will help make it easier to provide a headstone or marker for veterans who currently do not have a headstone and lay in an unmarked grave.

You may know in 2009 the Veterans Administration made a rule change that required notification of next of kin before a veteran could receive an initial headstone from the agency. That regulatory barrier of obtaining approval for next of kin creates an especially high barrier on veterans from much older conflicts, like the Civil War and the Revolutionary War, as well as homeless veterans that Congressman Green talked about earlier.

In my State of Ohio and in many other States, there are researchers—in Ohio, the Ohio Historical Society is one—that check the archives, death records, military records, and genealogical records to identify and determine the identity of Revolutionary War and Civil War soldiers who are buried in unmarked graves. These groups can work to identify the next of kin, but sometimes those people can be removed six and seven generations from that veteran, and it is hard to identify next of kin.

I understand the rationale of this VA rule, but it has an undue burden on homeless veterans as well as identifying and marking the graves of our veterans from the Civil War and Revolutionary War who sit in unmarked graves.

Those who served in our military deserve our full support, especially those who gave their last full measure of devotion for this great Nation. Our veterans, regardless of their era, who have served deserve better than to be marked in an unmarked grave.

And that is why, on May 16th of 2013, a bipartisan group of legislators introduced this bill. It would stipulate that if a next of kin cannot be found, the headstone application can be filed with the VA by a State veteran service agency, military researchers, local historians, genealogists, or anyone else familiar with military sources and methods that can identify a veteran's identity.

You know, President Abraham Lincoln, in his second inaugural address, called for the country to care for those who shall have borne the battle and for the widow and orphan, affirming the government's obligation to honor those who served our Nation. And in 1959, it became the VA's motto. Those who have given the final measure of service to our great Nation deserve a final resting place with a headstone worthy of their dedication, commitment, and devotion.

As one final point, I did hear that the Veterans Administration is not supportive of this bill because they believe they can fix this through a rule. I would note that they caused this problem through a rule and recognize they can fix it through a rule but this subcommittee had a hearing on this bill 6 months ago and the VA has, as of today, done nothing to move a rule forward to fix this problem.

And I would ask this committee to take this bill to markup and move this bill forward. While I recognize it can be fixed by rule, the VA has done nothing to do so. And it is time to fix this problem for our homeless veterans and our veterans from previous conflicts who today lay in unmarked graves because a next of kin cannot be found.

Thank you for your time. Again, I appreciate the chairman and ranking member for holding this hearing. And thank you for allowing me to testify today.

I yield back the balance of my time.

[THE PREPARED STATEMENT OF STEVE STIVERS APPEARS IN THE APPENDIX]

Mr. RUNYAN. Thank you, Congressman Stivers.

And, as noted, we will forego a round of questions with the first panel. Any questions that anyone has for this panel may be submitted for the record.

Mr. RUNYAN. On behalf of the subcommittee, I thank all of you for your testimony, and you are now excused.

And a vote having being called on the floor—there are four votes requested—so this committee will stand in recess for just about an hour.

[Recess.]

Mr. RUNYAN. The Committee on Disability Assistance and Memorial Affairs will now come to order.

We welcome our second panel to the witness table.

The second panel consists of Jeffrey Hall, the Assistant National Legislative Director for Disabled American Veterans; Alexander Nicholson, the Legislative Director for Iraq and Afghan Veterans of America; Heather Ansley, Vice President of Veterans Policy with VetsFirst; and Diane Zumatto, National Legislative Director for AMVETS.

Thank you all for being here today and thank you for your patience. Your full and written testimony will be made part of the record of today's legislative hearing.

[THE PREPARED STATEMENTS OF JEFFREY HALL, ALEXANDER NICHOLSON, HEATHER ANSLEY, AND DIANE ZUMATTO APPEAR IN THE APPENDIX]

Mr. RUNYAN. As previously noted, we will start with questions. I would like to start with Mr. Hall and go down the row.

My first question is about Chairman Miller's bill, H.R. 4102, which would allow benefits to be paid to a veteran's estate if the veteran passes away while a claim is pending and the veteran does not have an eligible survivor.

Since most of your organizations have seen situations similar to that of Shelton Hickerson, which the chairman highlighted in his opening statement, can you please share with the committee any additional anecdotes that you may have about the veteran who passed while awaiting a VA benefits decision?

Mr. Hall.

Mr. HALL. Yes. Actually—thank you for the question—it reminded me of a story when I was a service officer in Chicago before I left to go to New York. It was one of the last cases I had worked on. It was two sisters that had come in for some assistance.

The sum and substance of the story is that the veteran waited nearly 2-years to get his claim processed, and when he did get his claim processed, before they authorized and paid him the award, he became hospitalized. And while it took months and months and months for them to authorize the award, he ended up passing away in the hospital before the payment was actually made.

So the two daughters, who were no longer dependent children of him at that time, were not able to receive that benefit. And it was well over \$100,000 that the veteran was owed.

So, therefore, not only did it take them so long to process the award, then the ability for the veteran to receive that money or his next of kin was not able to receive that, or his heirs.

So DAV is fully in support of enactment of H.R. 4102 for those very reasons.

Mr. RUNYAN. Thank you.

Mr. Nicholson.

Mr. NICHOLSON. Thank you, Mr. Chairman.

Obviously, given our demographic at Iraq and Afghanistan Veterans of America, we don't have any anecdotes to offer in terms of deceased claimants. But, to us, this bill is a no-brainer. We are happy to join our VSO colleagues in supporting it.

You know, I think we were among those who did not realize that this was even an issue until, you know, some of the cases were brought to light in the media, which is a way in which we learn about a lot of these issues and, you know, come to support things that need to be changed.

So, for us, this was a no-brainer, and we are happy to support the change.

Mr. RUNYAN. Ms. Ansley.

Ms. ANSLEY. Thank you, Mr. Chairman.

I would say that if I were to speak with some of our veteran service officers, they could probably provide some of those anecdotes. I personally do not have one to share but do want to align myself with my colleagues, that we certainly support the bill and the aims that it is hoping to achieve. And it certainly makes sense that we would do this as quickly as possible.

Mr. RUNYAN. Ms. Zumatto.

Ms. ZUMATTO. I would agree with all the folks that have spoken before. I don't have any anecdotes to add, but AMVETS does support the legislation.

Mr. RUNYAN. I appreciate that.

I don't really have another question. I just want to touch on what I said in my opening statement. And I think you all agree with me that a permanent COLA needs to be accomplished. I see many nods up there. I would appreciate any and all help that you all can do with that.

Unfortunately, like a lot of things around here, it creates a lot of uncertainty for our veterans on what, you know, when you have that lapse in that calendar, is going to bring the following year. And it is unfortunate that, we put our veterans through that time and time again, when it is something that is very bipartisan and it passes every single time. Why do we have to create that uncertainty?

So I thank you all for your time.

And I will yield to the ranking member for her questions.

Ms. TITUS. Thank you, Mr. Chairman.

And I thank all of you, too, for providing the thoughtful testimony and for your support and help with these bills.

Mr. Hall, I know you highlighted in your testimony some of your concerns about H.R. 4095. And we heard Mr. Green, the sponsor of that, say that he was going to be working to come with some improvements to that bill. So I would ask you to work with him to see if we can do that. I know you mentioned the need for maybe a flat rate of payment, something like that. So we would appreciate having your input if we are going to consider this bill further.

I would also say to Mr. Nicholson, we had some of your members in our office earlier today. They are "storming the Hill." And they talked to us about "We've Got Your Back" because the high suicide rate among veterans is just something that we have to address. We have to do it at a personal level as well as a societal level. That is the way your suggestions were, and I thought that was great.

In your statement, you said you support the ranking member's bill that concerns the centers of excellence. I wondered if you might elaborate on that a little bit and how you think that would be helpful as well as what other suggestions you have for streamlining that claims process.

Mr. NICHOLSON. Yes, ma'am, we do. We, you know, have seen efficiencies found, I believe, in processes and innovations such as this.

And, you know, I would just say, though, that, you know, we have certainly heard some of the concerns of our colleague VSOs and, you know, echo those, as well, but we think that those are—you know, any kinks that they think may result as a result of this pilot program, and especially an expansion of it, can certainly be worked out. And we think a pilot is certainly a smart way to start.

But we believe that innovations like this have proven useful in other types of situations with other types of claims, and we think it is worthy of at least a pilot to try it out with this. Because there is no denying, you know, that there is an issue still at the VA with handling these claims and with the backlog still.

I mean, the VA has made enormous progress, you know, since, I think—like you mentioned, we are storming the Hill this year. And I think since we stormed the Hill last year at this time, the backlog is down 40 percent, which is fantastic. And we commend the VA for that progress. But, you know, we still have hundreds of thousands of veterans, each one of those an individual story, an individual life, with a family who was impacted by this, and so we don't want to let up the pressure.

And we do believe that, you know, we are willing to support anything that looks like it will work, that has precedence, that works in analogous situations. And we believe this is one that is at least worthy of a pilot.

Ms. TITUS. Well, thank you.

I yield back, Mr. Chairman.

Mr. RUNYAN. I thank the gentle lady for yielding back.

Again, on behalf of this subcommittee, I thank you for your testimony. This subcommittee looks forward to working with each of you, as the stakeholders in this, as we perfect this and bring it to,

I believe, a legislative markup in 2 weeks. So I look forward to it, and you are excused.

And I will ask the third panel to come to the table.

The third panel consists of Mr. Zachary Hearn, deputy director for claims, Veterans Affairs and Rehabilitation Commission for American Legion; Mr. Anthony A. Wallis, the legislative director and director of government affairs, the Association of the U.S. Navy; and Brendon Gehrke, Senior Legislative Associate for the Veterans of Foreign Wars.

Thank you all for being here today.

[THE PREPARED STATEMENTS OF ZACHARY HEARN, ANTHONY WALLIS, AND RAYMOND KELLEY APPEAR IN THE APPENDIX]

Mr. RUNYAN. As previously stated, we will go right to questions. My first question, is pertaining to H.R. 4191, the Quicker Veterans Benefit Delivery Act.

Can any of you provide specific examples of a case in which the veteran had sufficient private medical evidence for the record, yet the VA chose to order an additional exam to determine the benefit? Obviously we heard some of it from Congressman Walz earlier, but we would like to get the stories from you the stakeholders, and your exact experiences with it.

So, Mr. Wallis, any examples of it?

Mr. WALLIS. Thank you, Mr. Chairman.

At this moment, I do not have any specific examples. However, I know that our Members Services Department does get a lot of claims questions and issues that arise, mostly because we have frustrated members upset that their claims are taking so long to be answered.

And we do support H.R. 4191, the Quicker Benefits Delivery Act, as it seeks to help to end the backlog of claims by conserving VA resources and enabling quicker, more accurate decisions for veterans, allowing private medical evidence documentation for such claims.

So I feel like we are comfortable saying that this legislation would help with streamlining a lot of those claims and only seeks to benefit the veterans so that physicians in the field and localized with these veterans in their community will be better suited to help the VA process these claims.

Mr. RUNYAN. Let me ask this question, and we will continue down the line. To you again, do you have any examples, anecdotes of Chairman Miller's bill, 4102?

Mr. WALLIS. 4102.

Mr. RUNYAN. Yeah.

Mr. WALLIS. We do not have any specific anecdotes of that, as well, but we understand and appreciate the legislation in and of itself that also helps to answer a question regarding compensation for claims, as well.

You know, this was a frustrating circumstance with the individual in Indiana and his family for getting the claims and compensation processed in a timely fashion. So we are appreciative of that. We don't have any examples at this time, but we are appreciative of the legislation.

Mr. RUNYAN. Mr. Hearn.

Mr. HEARN. Good afternoon, Chairman.

Yes, before I became deputy director, I worked for several years over at the Board of Veterans' Appeals, and we would routinely see VA scheduling superfluous examinations where the evidence was contained within the C-file. I mean, it was self-evident; it didn't take a rocket scientist to discover it.

When we went out to the Seattle VA Regional Office, I want to say about 2 months ago now, I can think of one particular case where the veteran was going through the process of retiring, I believe. The evidence was contained in the veteran's military records to say that he had a certain condition; I believe it was sleep apnea. Despite that fact, they scheduled an examination.

And it becomes counterproductive with the fully developed claims process, and it delays a process that is meant to be expeditious. And so it becomes an unfortunate scenario.

Mr. RUNYAN. Thank you.

Mr. Gehrke, do you have any—

Mr. GEHRKE. In regards to H.R. 4102, I would like to note that, last year, 19,500 veterans died while awaiting benefits. I have heard people joke that veterans who are deceased get quicker service from the VA than living veterans. That is obviously not true, but we really have no idea how many veterans have died before they received benefits, who could not pass that on to their children.

What is the most frustrating part about that to the children is they often take care of the veteran while he is ill, while he is on his death bed. And, really, the veteran's benefit should be going towards that type of treatment, that type of hospice care for taking care of that veteran. So that kind of illustrates the real need for that, because it does present a financial hardship on the family.

In regards to H.R. 4191, most of the stories that I have heard regarding this have to do with PTSD treatment. Because of the nature of PTSD and it being so urgent, veterans will often seek help from a variety of sources. You know, Military OneSource will connect veterans with Give an Hour, who will then give PTSD treatment to the veteran because of their urgent need of that. So we see that more often than not with them.

This bill is something that all the Independent Budget VSOs have recognized is an issue and something that we urge the committee to pass.

Mr. RUNYAN. Thank you.

With that, I will yield to the ranking member, Ms. Titus.

Ms. TITUS. Thank you, Mr. Chairman.

Again, I would just note that some of you have suggested problems with Mr. Green's legislation and ask for your commitment to work with him between now and the markup. And I think that you have already established that.

I would just ask a little more about H.R. 4191. Maybe, Mr. Hearn, if you want to comment on that? From all your accredited service officers nationally who assist veterans with their claims, how can we and the VA assure the proper use and acceptance of private medical information?

Mr. HEARN. Just this past—or late last week, actually, the American Legion held the Department Service Officers School, and we were able to bring service officers in. And perhaps in language more direct than drill sergeants at times, they will express their

frustration regarding VA and the review of medical records from the private sector.

One of the easier ways is for examiners to—or private-sector physicians to utilize the disability benefits questionnaires because it is a standard form. I understand that there is some frustration within the medical community sometimes with that, because they are taking something and more or less making it fill in the blanks or something along those lines. But it has proven to be far more effective because it makes it a lot easier for raters to review that and say, it meets this criteria, it meets that criteria, and we can go ahead and rate it, and then it starts taking some of that gray area out.

Ms. Titus. Mr. Gehrke.

Mr. GEHRKE. I think in history and realizing the acceptance of private medical evidence, you have to realize that for a long time VA gave work credit for rating officers who requested a disability rating examination. So they would get a claim, and they would get credit just for requesting it, whether they had the private medical evidence there or not.

Much to VA's credit, they have gotten rid of that credit system. However, there seems to be somewhat of a culture there, that, you know, rating officers will automatically do that out of habit and request that rating examination.

And there is also a little bit of a turf battle, whether VA wants to do it in house or they fear outsourcing of it. It really depends on the regional office is what we found. Some regional offices are better at accepting than others. But we feel like there should be an entire standard throughout the VA in accepting private medical evidence.

Secretary Hickey has done a lot of work on this. I believe she gave a memo saying that all rating officers will accept private medical evidence if the claim is older than a year. And the VA can correct me if I am wrong on that. But we would like to see it for all claims, whether it has been backlogged for a year or two or whether it is starting now.

Because if it doesn't happen, it takes 180 days just to get a rating examination, on average—120 to 180, I believe. And so, that is, I mean, essentially the backlog right there. So you can eliminate a lot of that with that portion.

Ms. TITUS. Well, thank you. That is helpful.

I yield back, Mr. Chairman.

Mr. RUNYAN. I thank the gentle lady.

Gentlemen, I thank you for your patience and your testimony today. With that, this panel is now excused.

I welcome the fourth panel to the table.

On this panel, we will hear from Mr. Thomas Murphy, the director of compensation service with the U.S. Department of Veterans Affairs. He is accompanied by Patricia Lynch Watts, the Director for Legislative and Regulatory Service for the National Cemetery Administration with the U.S. Department of Veterans Affairs and Mr. David Barrans, the Deputy Assistant General Counsel for U.S. Department of Veterans Affairs.

Thank you all for being here today.

[THE PREPARED STATEMENT OF THOMAS MURPHY APPEARS IN THE APPENDIX]

Mr. RUNYAN. As previously noted, I will now begin the questioning.

First of all, Mr. Murphy, regarding H.R. 4095, the annual COLA legislation, do you think veterans would benefit from having an automatic COLA rather than an annual COLA, as provided in my previous bill that passed this House, which was H.R. 570?

Mr. MURPHY. Yes, Mr. Chairman, veterans will directly benefit from this. It keeps the benefits they receive in pace with inflation, just like is administered at Social Security today. It makes it easier for VA to plan and implement these. We know it is coming, it is on a consistent basis, and we are not waiting on a law to be passed at the last minute. This bill is just good all around.

Mr. RUNYAN. Thank you.

Regarding H.R. 2018, one of my constituents previously inquired whether it would be feasible to create a special exemption for veterans who died in the 1935 Labor Day hurricane. This addition would require the VA to provide group burial memorials for those men who died while enrolled in a veterans work program, a federally funded project during the Great Depression.

Two hundred, forty-four veterans remain buried in two unmarked mass graves in Florida. Whether by statute or regulation, would it be physically unfeasible or cost-effective to provide individual grave markers or a group burial memorial at these sites?

Mr. MURPHY. Sir, I have to defer to Ms. Watts on this one.

Mr. RUNYAN. Okay.

Ms. Watts.

Ms. WATTS. Thank you, Mr. Chairman.

The specifics of the cost of providing individual stones on that I would have to take back for the record. I don't have the information on exactly what those costs would be.

Mr. RUNYAN. Okay. Will you submit that for the record, please?

Ms. WATTS. Thank you.

Mr. RUNYAN. Thank you.

[The attachment appears in the Appendix]

Mr. RUNYAN. This would also be for Ms. Watts then.

Can you elaborate on VA's strong support of H.R. 3670 and specifically on your recommendation that the legislation change the medallion eligibility date to on or after April 6, 1917, rather than eliminating the date altogether?

Ms. WATTS. Yes. Thank you for that question, Mr. Chairman.

We are concerned about preserving the historical integrity of the headstones and markers from periods earlier than that. To provide the medallions on headstones for veterans whose service predates our entering World War I might impede our ability to preserve the historic integrity of those places. So we would respectfully ask that we be able to limit the availability of medallions for service back to the beginning of World War I.

Mr. RUNYAN. Okay.

And one more question about H.R. 4141. In the VA's written testimony, it is noted that the VA believes that the bill should allow enhanced-use leases on any and all underutilized and/or vacant VA-controlled properties.

Can you explain how this authority would be beneficial to the Department? Likewise, can you explain the concerns you have regarding the language as currently drafted regarding the land that is unsuitable for burial purposes?

Ms. WATTS. Yes, sir. The ability for VA to lease land that we are not currently using but that is usable land would be helpful under this enhanced-use authority. However, I believe the Department is concerned about the language, as you said, that limits the revised authority just to NCA land that is not used for burial.

Our concern is that the language specifically requires that the land not be suitable for burial. And what we would recommend is that the language be changed so that it is land that is not going to be utilized for burial for the period of the lease. That would allow us to use land that possibly is indeed usable for burial or suitable for burial, but that we have no plans in the immediate future to use for that reason.

Mr. RUNYAN. Thank you.

With that, I will yield to the ranking member, Ms. Titus.

Ms. TITUS. Thank you, Mr. Chairman.

I would like to thank the VA for your assistance on the bills that are before us today. I appreciate your working with us. And we are looking forward to receiving some of the cost estimates.

I would like to ask you, Mr. Murphy, in your written statement, you argue that the VA is looking to increase productivity and decrease wait times through a variety of initiatives.

Now, the Reno office has struggled to implement many new systems, and I would give you the example of VBMS. So I wonder what you are doing to ensure that some of these underperforming regional offices are going to be able to effectively implement these initiatives that you are talking about?

Mr. MURPHY. We don't have enough time to go into that in-depth of an answer.

Ms. TITUS. We have lots of time. Go ahead.

Mr. MURPHY. Okay.

For starters, we had an additional appropriation in 2014 of \$10 million to provide for training in underperforming offices. And one of the ways we are focusing that is in offices such as Reno where the individuals are underperforming and it is due to an individual's performance, lack of training, lack of skills, much like what we did with the set training in 2013.

The other part of that question is what other things are we implementing that are going to improve that production, improve that facility. It is the use of centralized mail, the use of stakeholder entry portal for veteran service organizations, the continued use of overtime that you are seeing that goes on today. There is a myriad of other people, process, technology improvements that are driving that today.

And while we are driving that and moving forward at the same time, we have to keep an eye on offices that are underperforming and not keeping up with the rest of the pack in the improvements in production and quality that we are seeing. And thanks to Congress, they have given us the money and the resources in order to do that during this fiscal year.

Ms. TITUS. Well, I appreciate that.

Also, in the testimony that we heard earlier, that we referred to earlier, from both the American Legion and the VFW, there were some serious concerns expressed about the communications between the VA and the VSO's own brokered claims. And we have experienced this in Nevada, too. Reno has kind of dealt with its backlog by brokering out about half of its claims to other places.

And so, I wonder if, as all these initiatives are going in place and you are brokering more and more of these claims and you are implementing this national work queue, do you have a communications strategy in place of working with the VSOs so they know what is going on and how to track these claims? And if you don't, can you get one? Can you make one? Or do you have plans to make one?

Mr. MURPHY. Yes, we absolutely have a strategy.

And, look, the communication is the key. If I can have an early communication with the veteran service organization representing that veteran, predecisional—which they have the right to look at that file for 24 hours—it doesn't do me any good for a power of attorney in Reno to not have access to a case that is being decided in North Carolina. It is in the veteran's best interest and the VA's best interest to allow that VSO the time to take a look at that case.

And the way we have to accomplish that is through the use of the stakeholder entry portal, by allowing full access to the VBMS and the file in an electronic environment so that the power of attorney representing that veteran can give an accurate assessment of the work that has been done before we finalize that claim. If I don't provide that, then it simply just adds up to another appeal that we have to deal with down the road.

Ms. TITUS. Could you share with us that communications plan, a copy of that plan?

Mr. MURPHY. Yes.

Ms. TITUS. Okay. Thank you.

I yield back, Mr. Chairman.

Mr. RUNYAN. I thank the ranking member.

I have one more question, I believe directed at Mr. Murphy, pertaining to H.R. 4191.

You have said in your testimony that the authority already exists for the VA to use private examinations. But I can tell you, a lot of people, I know on this staff here and in the stories we hear, don't feel they are given the proper weight all the time, and it feels like a rater almost defaults back to the VA automatically.

Is there anything that you can do or have done or training you have put in to guide them to say, this is a legal process and we need not to continue to burden our veterans and lengthen this period of time?

Mr. MURPHY. The statute and our regulations don't just provide for but require the rating of a case when the evidence is sufficient and meets a very long list of things that need to be met in order to rate a case.

And the part of the question about what have we done to provide for that, what we have done is we put out a policy from the national level that essentially error-proofs a case. So the individual is not held accountable if they use a DBQ, which is completed, submitted by the veteran, to rate the case. If that case later results

in an error, that error will not fall back to that individual. In other words, it is the system's fault that I need to go back and deal with at a different level, and there are no repercussions back to the individual for performance or for quality.

So I have put the right protections in place to put the right behavior in place on the part of our raters.

Mr. RUNYAN. Just one last thing. You also note that the VA does not track the number of claims eligible for ACE that requires additional evidence obtained through telephone interviews or whether private medical evidence is sufficient for rating purposes.

My question is, why isn't a process like that being tracked?

Mr. MURPHY. That is one of the things that we need to be tracking going forward, but coming from the paper environment that we have, bringing it into the automated world that we have today, we don't have all the steps and features in place that I can get the development detail to that level.

That is certainly something that is on our radar to be put in place. And what that will do is it will allow me to do, like several other systems, it provides me an opportunity to look at the exceptions and find out, is it an individual? Is it a particular office? Is it a particular process that I need to go back in and address?

So it is one that we are developing and putting into the system. It is not there today, however.

Mr. RUNYAN. And just one more question, a follow-up to what Ms. Titus had. She asked what the \$10 million is used for, as, arguably, the training regimen was developed already. What is the significant dollar amount? And while we complete the support and enhance intelligent training, what does it pay for?

Mr. MURPHY. What does it pay for? We are funded today to do our Challenge Training Program and other training events. This provides dollars well above and beyond to allow us to pull in people that would not otherwise be trained in 2014. And we can target and focus those specific underperforming individuals.

The dollars we have in place today takes care of new employee training, employees that have been promoted already. Well, if I am going to go out and make a difference in the environment on a large scale and pull underperforming employees in on top of that, that is where this additional funding comes in place.

Mr. RUNYAN. Okay.

Ms. Titus, anything further?

Ms. TITUS. No, thank you, Mr. Chairman.

Mr. RUNYAN. Well, thank you all for your testimony and answering the questions. On behalf of the subcommittee, I want to thank you for your testimony.

As noted, your written testimony will be entered into the hearing record and will inform the discussion on the legislation we have heard about today. We look forward to working with you in the future on these bills as well as a wide range of challenges facing our Nation's veterans.

You are excused.

I ask unanimous consent that all Members have 5 legislative days to revise and extend their remarks and include any extraneous material.

Hearing no objections, so ordered.

[The attachment appears in the Appendix]

[THE PREPARED STATEMENT OF THE PARALYZED VETERANS OF
AMERICA APPEARS IN THE APPENDIX]

Mr. RUNYAN. I thank the Members for their attendance today.
And this hearing is now adjourned.

[Whereupon, at 5:42 p.m., the subcommittee was adjourned.]

APPENDIX

PREPARED STATEMENT OF DINA TITUS, RANKING MEMBER

Thank you, Mr. Chairman for holding this hearing today on behalf of our nation's veterans.

Today, we are examining ten bills that pertain to issues of critical importance to our nation's veterans. I support several of these bills proposed by our colleagues, and am proud to have worked with the Chairman to introduce H.R. 4095, the Veterans' Compensation Cost-of Living Adjustment Act of 2014. This legislation will increase the rates of compensation for veterans with service-connected disabilities, and those surviving spouses of veterans who receive dependency and indemnity compensation. This is simply the right thing to do for our Veterans and survivors.

Also on today's agenda is H.R. 2088, introduced by Ranking Member Michaud, which would create Claims Processing Centers of Excellence. With the Ranking Member here to discuss his bill, I will defer to him to outline this legislation. But, I fully support his legislation and believe that this will build on VA's successes fighting the backlog.

H.R. 2119, the Veterans Access to Speedy Review Act, is brought forward by Mr. Ruiz, a member of our Subcommittee. His legislation seeks to address the appeals backlog, a high priority issue for this committee, by allowing the Board of Veterans Appeals to select the quickest way to schedule hearings for veterans.

Lastly, H.R. 2529, the Veteran Spouses Equal Treatment Act, would clarify the definition of "spouse" for the purpose of receiving VA benefits to include all spouses in any legally recognized marriage with a veteran in any state of the United States and its territories and possessions. The purpose of this legislation is to ensure that all veterans and their families are receiving the benefits they have earned through their military service. Unfortunately, current law precludes some veterans from receiving the benefits they have earned.

I believe this is a common sense approach, and I hope we can move this bill to the Floor as quickly as possible.

I thank all of the Members for their thoughtful legislation. And, I thank all of our esteemed witnesses for joining us today and look forward to hearing their testimony.

Thank you and I yield back.

PREPARED STATEMENT OF HON. AL GREEN ON H.R. 3876, THE BURIAL WITH DIGNITY FOR HEROES ACT OF 2014

Thank you Chairman Runyan and Ranking Member Titus for holding this hearing today and providing me with the opportunity to testify on H.R. 3876, the Burial with Dignity for Heroes Act of 2014.

Many veterans make the ultimate sacrifice for the citizens of United States of America and this should never be overlooked. Those who serve their country honorably should be properly memorialized at the time of their death. Unfortunately, too many homeless veterans are not presented with such an opportunity. Often, homeless veterans are buried without a proper funeral service because their families, or lack thereof, do not have the funding to cover the burial costs.

Currently, the Department of Veterans Affairs provides eligible homeless veterans with the opening and closing of the gravesite, a grave liner, a headstone or marker, and a graveside ceremony. However, the preparation of the body, transportation, clothing, casket and coordination of the funeral service are necessary services that the VA is unable to provide. At this time, the National Cemetery Administration (NCA) does not differentiate between claimed and unclaimed remains; therefore, there is not a definite way to determine the number of homeless veterans that are laid to rest each year without a proper burial.

I, along with my colleague Congresswoman Corrine Brown, have introduced H.R. 3876, the Burial with Dignity for Heroes Act of 2014, which would amend title 38 of the United States Code to allow the Department of Veterans Affairs to carry out a program to make grants to eligible entities to provide for the cost of burials for eligible homeless veterans. Outside entities will submit applications to the Secretary of Veterans Affairs who will determine which entities are eligible. This practical legislation would help eliminate the possibility of a hero not receiving a proper military funeral.

H.R. 3876 would provide for an eligible veteran to be laid to rest in a National Cemetery or a local cemetery. An eligible veteran is a deceased former service member:

- Who is homeless,
- Who is eligible to be buried in a National Cemetery,
- Who was not convicted of a capital crime,
- Who was not dishonorably discharged, and
- Who the Secretary of Veterans Affairs determines has no next of kin.

I am confident this legislation will help to ensure that all homeless veterans receive a burial with dignity.

Our nation's heroes deserve funeral services with military honors. The Burial with Dignity for Heroes Act of 2014 intends to ensure that all eligible veterans, regardless of their financial status at the time of their death, will be properly honored, and does so without appropriating any additional federal dollars.

Thank you again for the opportunity to present my testimony before this subcommittee.

I yield back the balance of my time.

PREPARED STATEMENT OF HON. TIM WALZ ON H.R. 4191, THE QUICKER VETERANS
BENEFITS DELIVERY ACT

Thank you, Chairman Runyan and Ranking Member Titus, for your leadership and for inviting us here today to speak on H.R. 4191, the Quicker Veterans Benefits Delivery Act.

With the hard-earned experience of two major wars during the last 12 years, Americans have developed a renewed understanding of the need to support our service members in battle and throughout their active-duty service.

Unfortunately, our warriors' battles don't always end when they return home. We've heard from many veterans who have returned bearing the scars of war—mental and physical disabilities incurred while protecting our freedoms. All they expect is that, in return for their service, our nation keeps its promises to them.

With the end of the war in Iraq, and the draw down of troops in Afghanistan, the number of disabled veterans who need care is increasing exponentially. Despite the fact the Department of Veterans Affairs is processing more claims today than at any time in history, veterans are waiting too long to receive the benefits they have earned, creating an unnecessary financial hardship for veterans and their families.

The VA reports 554,105 veterans have been waiting longer than 125 days to have their claim adjudicated. This is unacceptable, and VA Secretary Eric Shinseki, a retired U.S. Army General who has dedicated his life to military service and taking care of our brave warriors, agrees. While the VA is making progress, we believe there are common sense measures Congress can undertake to bolster the VA's efforts to ensure our veterans are getting the care they need in a more-timely manner.

In response to veterans and veterans' organizations who have told us about the hardships the VA backlog imposes on veterans, we introduced H.R. 4191 to help speed up the process.

We, along with Senator Franken, have introduced bipartisan measures in both the House and Senate that will remove several hurdles to getting claims processed quickly.

Our measure would allow local doctors to conduct disability medical examinations for veterans. This conserves VA resources, cuts back on long wait times at VA hospitals, enables quicker diagnoses of disabilities and eliminates unnecessary trips to the VA for veterans in rural communities.

Specifically, to further encourage the use of private medical evidence, we are amending title 38, United States Code, section 5125 to provide that, when a claimant submits private medical evidence, including a private medical opinion, that is competent, credible, probative, and otherwise adequate for rating purposes, the Secretary shall not request a VA medical examination. This legislative change would require VSRs and RVSRs to document that private medical evidence was inadequate for rating purposes before ordering examinations, which are often unnecessary.

Additionally, the legislation requires the Department of Veterans Affairs to complete two types of reports on the progress of this initiative: a report 180-days after passage of the bill that tracks the bill's implementation and an annual report that tracks the most common reasons and disabilities for which claims with evidence submitted by non-VA medical professionals were denied by VBA.

Our goal with this legislation is simple: to uphold the promises we've made to our veterans by ending the backlog and getting them the benefits they have earned and deserve. We know there is no silver bullet to eliminating the backlog, and we understand each step along the way requires thoughtfulness, analysis and synchronicity. However, we believe H.R. 4191 to be an integral step along the glide path to success. It is a common sense solution that will aid in adding efficiency to a complicated process in order to better serve our nation's heroes.

Thank you, Chairman Runyan and Ranking Member Titus, for the opportunity to speak on behalf of this bill.

PREPARED STATEMENT OF HON. JEFF DENHAM ON H.R. 4191, THE QUICKER
VETERANS BENEFITS DELIVERY ACT

Thank you for allowing me the opportunity to testify this morning in regard to the Quicker Veterans Benefits Delivery Act. The bill will end redundant Department of Veterans Affairs claims processing practices and allow veterans in my district to receive their benefits more rapidly.

I do not need to remind the members of this committee of the struggles faced by veterans trying to receive their disability compensation. Currently at the Oakland Regional Office of the Veterans Benefits Administration, which serves the veterans in my district, there are over 20,000 pending claims. 12,000 of those claims have been pending for more than 125 days. Nationwide, by the VA's own count there are more than 638,000 pending claims. 360,000 of these have been pending for more than 125 days.

Secretary Shinseki set the goal of eliminating the disability claims backlog by 2015 and this committee and Congress responded by providing billions in additional funding to improve technology, hire additional staff and reform the rating process for timelier decisions. The VSOs were also a vital part of this total effort, working hand in hand with the VA to create the Fully Developed Claims process to certify claim packets before they are submitted so that they can be swiftly approved.

However, while these efforts are important, we are skeptical that these initiatives alone will break the backlog by the stated goal of 2015. Congress needs to do more to bolster the VA's current efforts to modernize its operations and promote further improvements in order to get veterans' claims and compensation needs settled faster.

With that in mind, Congressman Walz and I worked with Veteran Service organizations to draft the Quicker Veterans Benefits Delivery Act. The bill will require the VA to maximize the use of private medical evidence. The bill would allow veterans to see their own doctor instead of waiting for an appointment with VA physicians who are often overworked or far away from the veteran's home. Congressman Walz and I both represent rural veterans, many of them elderly, and the challenge of traveling long distances for an appointment is one of their biggest barriers to accessing their veterans' benefits. This bill will help remove that hurdle from the benefits claims process.

Additionally this bill will conserve the VA's resources, allowing VA physicians to concentrate on patients with immediate needs rather than spend substantial time filling out disability claims paperwork.

We understand that there isn't one silver bullet that will break the backlog. However, the Quicker Benefits Delivery Act provides substantial, innovative, results-oriented measures that work to bolster the VA's current efforts.

I would like to thank the Veterans of Foreign Wars, the American Legion and the Association of the United States Navy for their support of this legislation.

Additional Signatures

PREPARED STATEMENT OF HON. ANDER CRENSHAW ON H.R. 4141

Thank you, Mr. Chairman. Thank you, Ranking Member Titus and the subcommittee for allowing me to testify on behalf of the legislation I have introduced, H.R. 4141, a bill to honor the fallen at national cemeteries.

The veterans of the United States deserve all recognition we can provide for their faithful and dedicated service to our Nation. One way we can recognize these veterans is by allowing veteran organizations to build and maintain facilities on federal property that can be used to honor the fallen and pay tribute to those who have made the ultimate sacrifice.

Passage of H.R. 4141 will authorize the Department of Veterans Affairs (VA) to accept organization's requests to use National Cemetery land for purposes that support the mission of the VA. The use of this land includes the creation of memorials and pavilions, paid for by private funds that will honor our fallen and past veterans and provide space for their loved ones to gather and reflect.

Until 2012, the VA could enter into Enhanced Use Leases (EULs) that furthered the mission of the Department and enhanced the use of the property in ways that would result in the improvement of medical care and services to veterans in the geographic area. The maximum lease term was 75 years, and the VA was to charge "fair consideration" for the lease, including in-kind payment.

The ability of the VA to offer EULs was changed as part of the Honoring America's Veterans and Caring for Camp Lejeune Families Act (P.L. 112-154). In this act, Congress limited the circumstances under which the VA may enter into EULs to "the provision of supportive housing."

H.R. 4141 does not reduce the requirements or authority of the Secretary of Veterans Affairs, or the National Cemetery Administration (NCA), to determine the proper way to ensure our veterans are honored. Instead, the legislation provides an additional avenue for the VA to work with groups to honor our veterans in a way that benefits local communities at minimal cost to the federal government.

This issue was brought to my attention by a Jacksonville, Florida, organization that has been working on a project to build a memorial center since the creation of the Jacksonville National Cemetery in 2007. In 2012, after years of hard work navigating the VA and NCA bureaucracy, the leaders of the Jacksonville National Cemetery memorial project were informed that it was no longer possible to obtain an enhanced use lease because the law had changed, and all their effort has been for not.

In North Florida, The Jacksonville National Cemetery Memorial Center would give 7,000 veterans and their families much needed services that are not provided at any of our current national cemeteries. It could include a commemorative hall and archive building. These spaces could provide families of the fallen places to gather and honor their loved ones, and would provide a place for the general public to learn more about those who have fought for our great Nation. The 7,000 veterans I mentioned are in North Florida alone. All over America, communities will come together to honor their fallen sons and daughters. These centers could become places for kindred spirits to gather and recognize the countless men and women who have given so much to their countries and their communities.

One of the most important features of this legislation is that we reinforce the reason these cemeteries exist, and that is to inter and honor our veterans. Future EULs will make it possible for memorials to be built to honor a community's local heroes, but will be regulated and overseen by the VA and NCA, and ultimately by this subcommittee and others with oversight responsibilities. After all, it is essential that we keep in mind that the cemeteries exist to lay to rest those brave men and women who have put themselves in harm's way for our Nation.

This legislation provides a way for the American people to honor our veterans as we move past more than a decade of war. It is also a way for communities to build memorial halls and pavilions showing respect for the honor, courage, and commitment of their loved ones. Additionally, the ability of organizations to build memorials will enhance the education of generations to come. One of the best ways that we can pass on a legacy of service and citizenship is by teaching our children and grandchildren about the sacrifices made by their forefathers.

Mr. Chairman, again, thank you and this subcommittee for giving me the opportunity to testify on H.R. 4141. I look forward to discussing these important issues with you, the distinguished members of the committee, and the veteran service organizations who continually work to ensure the American people keep our veterans in the forefront of our minds.

PREPARED STATEMENT OF HON. STEVE STIVERS

I want to thank Chairman Runyan for holding this important legislative hearing today on my bipartisan legislation, the Honor Those Who Served Act. The measure before the committee today will make it easier to provide headstones or markers for veterans who currently do not have a headstone and lay in an unmarked grave.

In 2009, the U.S. Department of Veterans Affairs (VA) issued a rule change that required 'Next of Kin' (NOK) be notified before a veteran received an initial headstone from the VA. Previously, the VA accepted and processed headstone claims

from funeral directors, cemetery officials, county veterans service officers, researchers and other civic organizations.

This new regulatory barrier of obtaining the approval from the NOK to receive a headstone for a deceased veteran is making it more difficult to honor the sacrifice of our veterans.

There are researchers, like those at the Ohio Historical Society, who research archives, death records, military records and genealogical records to determine the identity of Revolutionary and Civil War soldiers buried in unmarked graves. These groups then work to find the NOK. But, sometimes this is not possible when today's headstone applicants are seven generations removed from the Civil War, for example.

I understand the rationale of the rule to make sure family members are not left out of the decision-making process for obtaining a headstone, but the current rule is too restrictive and service members—especially Civil War era African American soldiers are left with unmarked graves.

Those who served in the military deserve our full support, especially those who gave the final measure of devotion to our great nation. Our veterans, regardless of what era they served in, deserve better than unmarked or deteriorated graves.

That is why on May 16, 2013, I introduced H.R. 2018 that would stipulate that if NOK cannot be found then headstone applications may be filed with the VA by: the state veterans service agency, military researchers, local historians, genealogists, or others familiar with research sources or methods needed to prove a veteran's identity.

In his second inaugural speech, President Abraham Lincoln stated, "To care for him who shall have borne the battle and for his widow and orphan," affirming the government's obligation to honor those who serve our nation. These words of Lincoln's became the VA's motto in 1959.

Those who gave the final measure in their service to our great nation deserve a final resting place with a headstone worthy of their dedication, commitment and devotion.

Again, I appreciate the Chairman for allowing me to testify today and holding this hearing.

PREPARED STATEMENT OF JEFFREY C. HALL ON DAV

Chairman Runyan, Ranking Member Titus and Members of the Subcommittee:

Thank you for inviting DAV (Disabled American Veterans) to testify at this legislative hearing of the Subcommittee on Disability Assistance and Memorial Affairs. As you know, DAV is a non-profit veterans service organization comprised of 1.2 million wartime wounded, injured and ill veterans and dedicated to a single purpose: empowering veterans to lead high-quality lives with respect and dignity. DAV is pleased to be here today to present our views on the bills under consideration by the Subcommittee.

H.R. 2018

H.R. 2018, the Honor Those Who Served Act of 2013, would amend Title 38, United States Code, to identify those persons who are eligible to request headstones or grave markers furnished by the Department of Veterans Affairs (VA). Currently Section 2036 of the law specifies who may request a headstone or marker from the VA. H.R. 2018 clarifies this issue by expanding the language of Section 2036 to identify eligible persons as the decedent's next of kin; a person authorized in writing by the decedent's next of kin to make such request; a personal representative authorized in writing by the decedent to make such request; when none of the aforementioned apply, a state veterans service agency, a military researcher, local historian, or a genealogist or other person familiar with the research sources and methods necessary to prove the identity of the decedent; or any person may make the request if the decedent's active military service preceded the application for headstone or marker by at least 62 years.

While DAV has no specific resolution to support this particular matter, we are not opposed to enactment of H.R. 2018.

H.R. 2088

H.R. 2088 would direct the VA to establish a pilot program for the designation of 12 Regional Offices as Centers of Excellence that will each focus or specialize on claims involving the most complex and time consuming issues such as post traumatic stress disorder (PTSD), traumatic brain injury (TBI), and military sexual

trauma (MST), as designated by the Secretary. While demonstrated progress was achieved last year in reducing the backlog of claims, other VBA initiatives similar to the Centers of Excellence, such as a national work queue model and centralized mail centers, are currently being proposed within the Veterans Benefits Administration (VBA).

Although VBA has not provided detailed information about any national work queue model, our understanding is that this will allow all claims to be processed nationally by Veterans Service Representatives (VSRs) and Rating Veterans Service Representatives (RVSRs), regardless of their physical location or the origin of the claim. This is essentially the same approach VBA took last year when they processed all claims pending more than two years within a short period. With all claims now becoming virtual once submitted and/or converted electronically, claims processing can be done by any fully trained VSR or RVSR regardless of their physical location. This approach is not unlike the process of brokering claims from one Regional Office to another when assistance is needed, which VBA has relied heavily upon over the years. So taking the basic concept of brokering claims and VBA's "all hands" strategy they used last year to process the oldest claims and applying it to national workload may have the potential for success; however, we are just learning more details of how the national work queue model will work.

For the past several years, VBA has discussed the general concept of establishing Centers of Excellence, wherein specific Regional Offices would be designated to process specific types of claims for the entire country. For example, a particular Regional Office would be designated as a Center of Excellence for claims involving PTSD, TBI, and MST, and all claims containing such conditions would be processed by that facility for the entire country.

While Centers of Excellence could relieve the majority of VAROs from processing some of the more time consuming, complex claims, it must be done properly, with certain principles guiding such as model. One key question is would multiple issue claims be split by issues and processed by multiple centers? What would happen when a VARO receives a claim for PTSD and an orthopedic condition—would the origin VARO process the orthopedic condition or would a PTSD Center of Excellence process all issues? Such questions are crucial and we believe that VBA must move in a deliberate and thoughtful manner to ensure that Centers of Excellence are truly "excellent," not just "centers" for complex, time consuming claims. For these reasons, we recommend that VBA begin with just four Centers of Excellence and that they carefully study whether or not they are successful before expanding to additional ROs. In addition, it is important that employees at these Centers of Excellence receive comprehensive training on their specialty.

Additionally, with the national work queue model being developed and all claims becoming virtual, is an entire Regional Office being designated as a Center of Excellence still a viability? Since all claims are virtual and physical location may be less important now, maybe it would be more prudent for VBA to designate particular individuals or teams in every Regional Office who would process certain issues such as PTSD, TBI and MST instead of an entire Regional Office being dedicated to those issues. To be clear, DAV is not opposed to the concept of establishing Centers of Excellence as there are certain advantages, such as all specialized claims being processed by a select group of experts. However, given the progress with VBA's technology, specifically the Veterans Benefits Management System, contemplation should be given to the alternatives through technology versus designating an entire Regional Office as a Center of Excellence, which may very well become a centralized repository of the most backlogged claims because they are most time consuming and complex.

While we do have questions about establishing Centers of Excellence, we agree with the principal intent of the legislation, which is to redirect the most time consuming and complex claims away from the national workload, possibly reducing the backlog, and into the hands of select individuals who receive support and training as experts in particular matters. However, we do request DAV, other veterans service organizations and interested stakeholders be included in as much of the deliberation, development, and strategy process as possible, as well as kept apprised throughout.

H.R. 2119

H.R. 2119, the Veterans Access to Speedy Review Act, would allow the Board of Veterans' Appeals upon receiving a request for hearing to determine, for the purposes of scheduling the hearing for the earliest date possible as well as the location of the hearing and the type of hearing, be it in person or by use of videoconferencing equipment. Once the appellant is notified of the Board's determination of the type and location of the hearing, the veteran would be able to request a different type

or location, and if so, the Board may grant such request while ensuring the hearing is scheduled as soon as possible and without delay.

While we support the purpose of H.R. 2119 and take no issue with the Board determining the type and location of a hearing, we do not agree with the language of the bill where it states “if so requested, the Board may grant such request.” Specifically, this bill as written would allow the Board to determine the type and location of a hearing and deny a request from a veteran who prefers to have an in-person hearing with a Board member rather than a video conference hearing. We believe the veteran’s right to a hearing also includes the right to choose the type and location, which could be adversely impacted with this bill as written, so in order to preserve such right, we recommend the aforementioned sentence be changed to, “if so requested, the Board shall grant such request . . .”

DAV would support enactment of H.R. 2119 if the language is amended to prevent the Board from overriding a veteran’s requested venue for a hearing.

H.R. 2529

H.R. 2529, the Veteran Spouses Equal Treatment Act, would amend title 38, United States Code, redefine the term “spouse” to recognize new state definitions of such term for the purpose of the laws administered by the VA.

DAV has no resolution on this particular matter, and has no position on this bill.

H.R. 3671

H.R. 3671 would amend title 38, United States Code, to expand the eligibility for a medallion furnished by the VA, which is used to signify the status of a deceased individual as a veteran. Currently, Section 2306(d)(4) states, “in lieu of furnishing a headstone or marker under this subsection, the Secretary may furnish, upon request, a medallion or other device of a design determined by the Secretary to signify the deceased’s status as a veteran, to be attached to a headstone or marker furnished at private expense.” H.R. 3671 would expand eligibility to persons “regardless of the date of the death of individual for whom the medallion or other device is furnished.”

While DAV has no specific resolution on this particular matter, we are not opposed to enactment of H.R. 3671.

H.R. 3876

H.R. 3876, the Burial with Dignity for Heroes Act of 2014, would direct the Secretary of Veterans Affairs to carry out a program to make grants to eligible entities to provide for the cost of burials for homeless veterans who are eligible to be buried in national cemeteries and when the Secretary determines the veteran has no next of kin. Currently, the law allows the surviving spouse, dependent child or dependent parent to receive a \$2,000 burial allowance when the death is service related, and \$300 when the death is not service related. H.R. 3876 does not specify the amount of the intended grant, which would be payable to an individual who may not even be related to the decedent homeless veteran. While we certainly agree with the intent of H.R. 3876, we do not believe the amount should exceed the burial allowance provided to eligible survivors.

While DAV has no specific resolution on this particular matter, we would not be opposed to its enactment as long as our concerns above are addressed.

H.R. 4095

H.R. 4095, the Veterans’ Compensation Cost-of-Living Adjustment Act of 2014 would increase, effective December 1, 2014, the rates of compensation for veterans with service-connected disabilities and the rates of dependency and indemnity compensation (DIC) for the survivors of certain disabled veterans. A cost-of-living adjustment (COLA) was passed last year at the modest increase of 1.5%, which did not include the long standing practice of rounding down to the nearest whole dollar amount. As you know, many disabled veterans and their families who rely heavily or solely on VA disability compensation or DIC as their only means of financial support have struggled during these difficult times. While the economy has faltered, their personal economic circumstances have been negatively affected by rising costs of many essential items, including food, medicines and gasoline. Rising inflation continues to be a major factor, so it is imperative that veterans and their dependents receive a timely COLA and DAV supports enactment of H.R. 4095, which is in accordance with our resolution.

However, in keeping with another longstanding resolution, DAV is adamantly opposed to Section 2(c)(2) of the bill that once again requires the unacceptable practice of “rounding down” COLA increases to the next lower whole dollar amount, which incrementally reduces the support to disabled veterans and their families and survivors. The practice of permanently “rounding down” a veteran’s COLA to the next

lower whole dollar amount can cause undue hardship for veterans and their survivors whose only support comes from these programs and it is time to end this practice, which was only intended to be a temporary measure more than twenty years ago.

H.R. 4102

H.R. 4102 would expand Title 38, United States Code, to include the estate of a deceased veteran as an eligible recipient of certain accrued benefits upon the death of the veteran when such benefits would not be payable to any survivor. Currently, Section 5121 does not allow accrued benefits payable upon death of the veteran to be paid to any entity other than eligible survivors, and if there are none, essentially those benefits, which can be in the hundreds of thousands of dollars, are lost or forfeited. Enactment of this bill would allow the deceased veteran's estate to be eligible for such benefits.

This legislation is designed to correct an unfair practice that currently denies the lawful heirs of a deceased veteran from receiving these earned funds. Accordingly, DAV supports enactment of H.R. 4102.

H.R. 4141

H.R. 4141 would amend Title 38, United States Code, authorizing the VA to enter into enhanced-use leases for excess property of the National Cemetery Administration, which has been deemed unsuitable for burial purposes.

While DAV has no specific resolution on this particular matter, we are not opposed to enactment of H.R. 4141.

H.R. 4191

H.R. 4191, the Quicker Veterans Benefits Delivery Act, would expand Section 5125 of title 38, United States Code, to improve how private medical evidence submitted in support of a claim for disability compensation is treated by the VA.

Currently, Section 5125 states, "for purposes of establishing any claim for benefits ... a report of a medical examination administered by a private physician that is provided by a claimant in support of a claim ... may be accepted without a requirement for confirmation by an examination by a physician employed by the Veterans Health Administration if the report is sufficiently complete to be adequate for the purpose of adjudicating such claim." Currently the VA has the option of accepting such private medical evidence within the present language of "may be accepted" as contained within Section 5125. H.R. 4191 removes such option and replaces "may" with "shall," which will require the VA to accept private medical evidence submitted by the veteran, while also clarifying the term "sufficiently complete" to mean evidence that is competent, credible, probative, and containing such information as may be required to make a decision on the claim for which the evidence is provided.

DAV is very much interested in the VBA reducing the backlog of pending disability claims, but as we have consistently maintained, not at the risk of reducing quality. Likewise, DAV has been a longtime proponent of certain actions VBA could take, which could have a positive impact on the speed of the claims process. Requiring VBA to accept private medical evidence submitted by the veteran, so long as it is adequate for rating purposes, as is the intent of Section 2 of this bill, is one type of action DAV has strongly advocated for in recent years.

In accordance with our resolution to improve the claims process, DAV strongly supports enactment of H.R. 4191.

Mr. Chairman, this concludes my testimony and I would be happy to answer any questions from you or members of the Subcommittee.

STATEMENT OF IRAQ & AFGHANISTAN VETERANS OF AMERICA

Statement of Iraq & Afghanistan Veterans of America on Pending Disability and Memorial Affairs Legislation

| Bill # | Bill name | Sponsor | Position |
|-----------|--|--------------|----------|
| H.R. 2018 | Honor Those Who Served Act of 2013 | Rep. Stivers | Support |
| H.R. 2088 | A bill to establish centers of excellence for claims adjudication of complex medical conditions. | Rep. Michaud | Support |

Statement of Iraq & Afghanistan Veterans of America on Pending Disability and Memorial Affairs Legislation—Continued

| Bill # | Bill name | Sponsor | Position |
|-----------|---|---------------|----------|
| H.R. 2119 | Veteran Access to Speedy Review Act | Rep. Ruiz | Support |
| H.R. 2529 | Veteran Spouses Equal Treatment Act | Rep. Titus | Support |
| H.R. 3671 | A bill to expand eligibility for medallions furnished by VA to signify veteran status. | Rep. Miller | Support |
| H.R. 3876 | Burial with Dignity for Heroes Act of 2014 | Rep. Green | Support |
| H.R. 4095 | Veterans' Compensation and Cost-Of-Living Adjustment Act of 2014. | Rep. Runyan | Support |
| H.R. 4102 | A bill to authorize an estate of a deceased veteran to receive accrued benefits upon death. | Rep. Miller | Support |
| H.R. 4141 | A bill to authorize VA to enter into enhanced-use leases for excess property at NCA. | Rep. Crenshaw | Support |
| H.R. 4191 | Quicker Veterans Benefits Delivery Act | Rep. Walz | Support |

Chairman Runyan, Ranking Member Titus, and Distinguished Members of the Subcommittee:

On behalf of Iraq and Afghanistan Veterans of America (IAVA), I would like to extend our gratitude for being given the opportunity to share with you our views and recommendations regarding this important legislation that will impact the lives of IAVA's members and all of America's troops and veterans.

As the nation's first and largest nonprofit, nonpartisan organization for veterans of the wars in Iraq and Afghanistan, IAVA's mission is critically important but simple—to improve the lives of Iraq and Afghanistan veterans and their families. With a steadily growing base of nearly 270,000 members and supporters, we aim to help create a society that honors and supports veterans of all generations.

In partnership with other military and veteran service and advocacy organizations, IAVA has worked tirelessly to see that our members' needs are appropriately addressed by the Department of Veterans Affairs (VA) and by Congress. IAVA appreciates the efforts put forth by this Subcommittee to address the challenges facing our nation's veterans and their families, and we are proud to offer our support for the legislation that is the subject of this hearing today.

H.R 2018

IAVA supports H.R. 2018, the Honor Those Who Served Act, which would expand the list of individuals eligible to request a headstone for a veteran. Enabling additional authorized requestors will help ensure more veterans receive the recognition they deserve. IAVA supports all veterans receiving such recognition and encourages Congress to approve the proposed authorization expansion.

H.R 2088

IAVA supports H.R. 2088, which would require the VA to establish a pilot program for claims processing "Centers of Excellence" that would focus on adjudicating disability compensation claims for certain types of medical issues.

In order to help facilitate the transition to a 21st century VA, IAVA supports utilizing practices which streamline and improve the claims adjudication process. This proposed Center of Excellence pilot program will allow the VA to develop sets of teams that will be highly proficient at processing certain types of claims. IAVA believes such Centers of Excellence hold the potential to help improve the efficiency of the claims adjudication process, and we encourage the VA to continue implementing innovative work management solutions.

However, IAVA does share some of the concerns other VSOs have raised with the potential unintended consequences of brokering claims work in this manner. While this process can potentially help the VA adjudicate claims more quickly, there are several important issues that must also be addressed if the VA plans on expanding this program beyond the pilot level.

Most importantly, the process of brokering work does not necessarily address the underlying inefficiencies and issues at under-performing regional offices. In order to

improve the system overall, the internal processes and management of each regional office must be reviewed and adjusted if an office continues to be incapable of managing its own workload. The successful work flow of each and every regional office will ultimately be critical to not only eliminating the backlog by 2015, but also preventing a recurrence of the backlog in the future.

Additionally, our colleague VSOs have raised concerns about the issue of “ownership” with brokered claims. Since the VA typically processes claims in the same state or region where the claimant resides, moving claims to different states or regions of the country potentially removes a sense of “ownership” and may have an impact on the quality of many brokered claims. It is imperative that the VA address this potential ownership issue before expanding the number brokered claims.

And finally, the effect that brokering work may have on the services and support offered by veteran service officers during the claims process must also be carefully considered. The relationships these service officers develop with veterans and claims adjudicators within their respective regional offices is important. When work is brokered to states or regions far removed from a veteran service officer, the benefit of that relationship may be lost. The VA must work with the VSO community to ensure the critical coordination between veteran service officers and claims adjudicators is protected.

H.R 2119

IAVA supports H.R. 2119, the Veteran Access to Speedy Review Act, which would authorize the Board of Veterans Appeals to hold hearings at alternative locations or use videoconferencing technology in order to schedule hearings at the earliest possible date.

The number of veterans waiting on disability rating appeals decisions continues to increase. However, veterans should not have to wait for a hearing due to simple logistical concerns. Efforts to hold appeals hearings at the earliest possible date is critical to the VA addressing claims appeals in a timely manner. Additionally, IAVA supports the right of the veteran to object to alternative locations or hearing types while still being offered the earliest possible hearing date.

H.R 2529

IAVA supports H.R. 2529, the Veteran Spouses Equal Treatment Act, which would amend the definition of “spouse” within Title 38 to recognize all valid marriages for the purposes of receiving all VA benefits.

The need for equitable access to benefits and VA services for all veterans and their families is critical to ensuring the VA is providing the highest level of care and services, and also to making sure that VA is on par with what DoD is offering to troops. IAVA supports equitable treatment of all veterans and their families and supports the changes this legislation seeks to make to Title 38. However, Section 103(c) of Title 38 must also be amended to make the proposed changes effective. IAVA encourages this Subcommittee to also amend Section 103(c) of Title 38.

H.R 3671

IAVA supports H.R. 3671, which expands the eligibility for medallions furnished by the VA to signify the veteran status of a deceased individual. If a veteran is buried in a private cemetery, the VA may provide a headstone or marker to signify veteran status. In lieu of a headstone or marker, the VA may also provide a medallion to signify veteran status. This legislation amends Title 38 to authorize these medallions regardless of the date of death of the veteran. IAVA believes that all veterans deserve proper honor and recognition and, therefore, we support this change in law.

H.R 3876

IAVA supports H.R. 3876, the Burial with Dignity for Heroes Act of 2014, which would provide grants to cover the burial costs of homeless veterans.

All veterans deserve the dignity and honor earned with military service, and no veteran should be forgotten simply because of homelessness. Until veteran homelessness is eradicated, it is imperative that the VA ensure all veterans are honored with dignity at burial regardless of their personal situation.

H.R 4095

IAVA supports H.R. 4095, the Veterans’ Compensation and Cost-Of-Living Adjustment Act of 2014, which would provide an increase in the rates of compensation for veterans with a service-connected disability and the rates of dependency and indemnity compensation for survivors of certain veterans.

The rates of service-connected disability compensation and dependency and indemnity compensation for survivors must be adjusted to account for inflation. These

adjustments are necessary to continue providing veteran and survivor compensation rates that are adequate for increased cost-of-living expenses.

As the December 2013 budget deal demonstrated, veterans and their families are not exempt from budget cuts and fiscal limitations. However, earned benefits should never be compromised. This proposed statutory cost-of-living adjustment is needed to safeguard compensation benefits for veterans and their families. IAVA believes that veterans and survivors should always be guaranteed fiscal security that is adjusted to account for a changing economy.

H.R. 4102

IAVA supports H.R. 4102, which would authorize the estate of a deceased veteran to receive accrued benefits upon the death of the veteran.

The case of Sergeant First Class (SFC) Shelton Hickerson, mentioned in this legislation, is an unfortunate illustration of the hardship that long wait times and multiple appeals can place on veterans and their families. SFC Hickerson was a retired Vietnam veteran who had multiple strokes, two of which occurred while still on active duty. He spent over a decade waiting for his disability compensation claim to be accurately adjudicated, but he passed away one day before receiving his final adjudication.

Unfortunately, SFC Hickerson's story is not unique. As currently written, if a veteran does not have a spouse or any children under the age of 18, the earned benefits remain in with the U.S. Treasury. In addition to its responsibility to serve and care for the veteran, a core aspect of VA's mission is also to care for the survivors of veterans. As a result, it is logical that VA has a responsibility to grant the estate of a veteran all accrued benefits if a veteran dies while stuck in the claims process.

H.R. 4141

IAVA supports H.R. 4141, which authorizes the VA to enter into enhanced-use leases for excess property unsuitable for burial within the domain of the National Cemetery Administration (NCA).

The VA's enhanced-use lease program is considered an innovative asset management program within the government. It allows the VA to optimize its asset management capabilities by entering into agreements with entities that utilize VA facilities to contribute to the overall mission of the VA. Specifically looking at land owned by the NCA, IAVA supports land unsuitable for burial should being eligible for enhanced-use leases in order to maximize the capabilities of the NCA while effectively managing all assets.

H.R. 4191

IAVA supports H.R. 4191, the Quicker Veterans Benefits Delivery Act, which would improve the treatment of medical evidence provided by non-VA medical professionals in support of disability compensation claims.

IAVA strongly supports efforts to minimize the burden placed on veterans when filing disability compensation claims. If a veteran provides medical evidence from a licensed medical professional that supports their claim with the VA, the VA should consider this evidence with the same gravity as medical evidence from VA medical professionals. As currently written, Title 38 states that the VA may consider evidence from non-VA medical professionals, but does not require the VA to consider this type of evidence. Title 38 should be amended to eliminate this ambiguity.

Mr. Chairman, we at IAVA again appreciate the opportunity to offer our views on these important pieces of legislation, and we look forward to continuing to work with each of you, your staff, and this Subcommittee to improve the lives of veterans and their families.

Thank you for your time and attention.

Bio of Alexander Nicholson, Legislative Director, Iraq and Afghanistan Veterans of America: Alexander Nicholson serves as the Legislative Director for Iraq and Afghanistan Veterans of America (IAVA). As one of IAVA's top advocates on Capitol Hill, Mr. Nicholson helps shape IAVA's legislative strategies and priorities throughout the year. He is responsible for developing relationships, assisting in advocacy efforts, and implementing IAVA's Policy Agenda. Prior to joining IAVA, Mr. Nicholson founded and led the advocacy group Servicemembers United for the preceding seven years.

Mr. Nicholson holds a Bachelors degree in international affairs from the University of South Carolina, a Masters degree in public administration from the University of North Georgia, and is currently completing the dissertation on his Ph.D. in political science from the University of South Carolina.

Statement on receipt of Federal Grant or Contract Funds:

Neither Mr. Nicholson nor the organization he represents, Iraq and Afghanistan Veterans of America, has received federal grant or contract funds relevant to the subject matter of this testimony during the current or two previous fiscal years.

PREPARED STATEMENT OF HEATHER L. ANSLEY

Executive Summary of the Testimony of VetsFirst, a program of United Spinal Association

Honor Those Who Served Act of 2013 (H.R. 2018)

Although we do not typically comment on specific memorial affairs issues, we support efforts to ensure that veterans receive proper headstones or makers.

Pilot to Establish Claims Adjudication Centers of Excellence (H.R. 2088)

We believe that efficiencies may be gained from allowing claims with complex medical conditions to be worked by specialized employees at centers of excellence. However, we suggest that this legislation be amended to provide specific reporting requirements to Congress assessing the pilot's success, including interim reports identifying any problems in implementing the pilot.

Veterans Access to Speedy Review Act (H.R. 2119)

We would support this legislation if amended to ensure that an appellant's request for a different location or type of Board of Veterans' Appeals hearing must be granted.

Veteran Spouses Equal Treatment Act (H.R. 2529)

We support this legislation which will ensure access to benefits for same-sex couples with legally recognized marriages.

Furnishing of Medallion to Signify Veteran Status of Deceased Individual (H.R. 3671)

Although we do not typically comment on specific memorial affairs issues, we support efforts to ensure that veterans of all eras are able to receive benefits that acknowledge their military service.

Burial With Dignity for Heroes Act of 2014 (H.R. 3876)

We do not have an official position on this legislation.

Veterans' Compensation Cost-of-Living Adjustment Act of 2014 (H.R. 4095)

We support swift passage of this legislation, but urge that the round down be removed.

Eligibility of Estates of Deceased Veterans to Receive Accrued Benefits (H.R. 4102)

We urge swift passage of this legislation to protect the accrued benefits of deceased veterans.

Enhanced-Use Leases for Excess Property of the National Cemetery Administration (H.R. 4141)

We support enhanced-use lease authority for excess National Cemetery Administration property.

Quicker Veterans Benefits Delivery Act (H.R. 4191)

We support this legislation to increase the acceptance of private medical evidence and urge its swift passage.

Chairman Runyan, Ranking Member Titus, and other distinguished members of the subcommittee, thank you for the opportunity to testify regarding VetsFirst's views on the bills under consideration today.

VetsFirst, a program of United Spinal Association, represents the culmination of over 65 years of service to veterans and their families. We advocate for the programs, services, and disability rights that help all generations of veterans with disabilities remain independent. This includes access to VA financial and health care benefits, housing, transportation, and employment services and opportunities. Today, we are not only a VA-recognized national veterans service organization, but also a leader in advocacy for all people with disabilities.

Honor Those Who Served Act of 2013 (H.R. 2018)

A VA headstone or maker may be requested by a decedent's next-of-kin, a decedent's authorized representative, or a next-of-kin's authorized representative. This

legislation would allow organizations or individuals that do not meet these criteria to apply for headstones or markers for veterans whose headstones or markers have deteriorated or are unmarked. VetsFirst does not typically comment on specific memorial affairs issues. We support efforts, however, to ensure that all veterans receive the full honors due them, including access to proper headstones or makers.

To Direct the Secretary of Veterans Affairs to Carry Out a Pilot Program to Establish Claims Adjudication Centers of Excellence (H.R. 2088)

This legislation would establish a pilot program requiring VA to designate 12 claims adjudication centers of excellence. These centers of excellence would focus on adjudicating claims related to one medical condition selected by the VA Secretary. Conditions selected for the pilot will be those that are the most complex and time consuming commonly occurring conditions. Employees adjudicating claims within these centers of excellence would receive training specifically related to the types of medical conditions being adjudicated.

VetsFirst believes that efficiencies may be gained from allowing claims with complex medical conditions to be worked by specialized employees at centers of excellence. We believe, however, that this legislation should provide guidelines for assessing whether the pilot is successful, including interim reporting requirements identifying any problems in developing and implementing the pilot. In addition, we believe that VA should be required to evaluate whether the centers increase quality in the adjudication of the selected conditions and whether centers have an even distribution of work or whether some are overwhelmed, potentially creating new backlogs.

As VA moves toward full implementation of electronic claims processing, VA may seek greater efficiencies through the adjudication of claims by issue at different regional offices. In the event that claims are processed in different locations by issue, we believe that an individual at the regional office having jurisdiction over the veteran's location should conduct a final review for benefits or related disabilities that may only be evident if the veteran's claim is reviewed holistically.

Veterans Access to Speedy Review Act (H.R. 2119)

Appellants to the Board of Veterans' Appeals have the opportunity to request a personal hearing on their claim and to select the location and means by which the hearing occurs. This legislation would require the Board to schedule appeals hearings in the location that would allow for the earliest possible hearing date. It would also require the Board to determine whether the appellant is required to appear in person or through the use of a video conference. An appellant would have the opportunity to request a different location or type of hearing. This request may be granted by the Board.

VetsFirst supports efforts to expedite veterans' claims appeal waiting times. However, we believe that if an appellant makes a request for a different location or type of hearing that this request should be granted. Ensuring that appellants have the opportunity to disagree with the location or type of hearing is a better way to ensure that hearings occur as quickly as possible while respecting appellants' rights.

We would support legislation that ensures appellants' requests for a different location or type of hearing must be granted.

Veteran Spouses Equal Treatment Act (H.R. 2529)

Nearly a year ago, the U.S. Supreme Court held that a provision of the Defense of Marriage Act defining the terms "marriage" and "spouse" as used in federal law as applying only to individuals who are of the opposite sex was unconstitutional. As a result of the Court's decision, the President directed that VA no longer enforce prohibitions under Title 38 that would prohibit the receipt of benefits for otherwise eligible members of same-sex couples who have legally valid marriages. To facilitate access to all VA benefits available to legally recognized spouses, this legislation would amend Title 38 to define the term "spouse" based on whether the marriage of the individual was valid under an applicable state's law.

We support this legislation which will ensure access to VA benefits for same-sex couples with legally recognized marriages.

To Expand Eligibility for a Medallion Furnished by the Secretary of Veterans Affairs to Signify Veteran Status of a Deceased Individual (H.R. 3671)

Medallions signifying veteran status of a deceased individual are available for veterans who died on or after November 1, 1990. This legislation would allow VA to provide a medallion upon request regardless of when the veteran died. Although VetsFirst does not typically comment on specific memorial affairs issues, we support

efforts to ensure that veterans of all eras are able to receive benefits that acknowledge their military service.

Burial With Dignity for Heroes Act of 2014 (H.R. 3876)

To increase access to VA burial benefits for entities or individuals who provide for the burial of veterans with no next of kin or other person claiming the body, a provision of Public Law 112-260, which went into effect on January 10, 2014, provides greater access to VA burial benefits when a veteran's estate is unable to cover burial and funeral costs. In recent years, however, the average cost of funerals has significantly outpaced the benefits available through VA. Burial benefits range from \$2000 for service-connected deaths to as low as \$300 for non-service-connected deaths. The average cost of a funeral in 2012 was \$7,045.¹

This legislation would provide grants for eligible entities to provide for the costs of burials for homeless veterans. VetsFirst does not have an official position on this legislation. However, we believe that any grants available should take into account any increased access to benefits that may be available under Public Law 112-260 and the burden of funeral and burial costs for all veterans due to the limited benefits available through VA.

Veterans' Compensation Cost-of-Living Adjustment Act of 2014 (H.R. 4095)

Disabled veterans and their survivors depend on VA benefits to provide for themselves and their families. Cost of living adjustments (COLAs) are an important aspect of ensuring that these benefits are able to meet beneficiaries' basic needs.

This legislation would ensure that the disabled veterans and their survivors who receive these benefits are eligible for a COLA on December 1, 2014. Although the COLA received in 2013 was only 1.5 percent, this small increase is critical for disabled veterans and their survivors. We would request, however, that any increase not be rounded down to the next whole dollar amount.

We urge swift passage of this legislation which would ensure that disabled veterans and their survivors are able to benefit from any COLA increase.

To Clarify That the Estate of a Deceased Veteran may Receive Certain Accrued Benefits Upon the Death of the Veteran (H.R. 4102)

If a veteran who has no dependents is owed accrued benefits from VA but passes away before those benefits are released his or her estate is not able to receive those benefits. This legislation would ensure that benefits accrued to a deceased veteran will be payable to a veteran's estate in the event that he or she has no surviving dependents. This provision will only apply in those circumstances in which the estate would not escheat.

The case of Mr. Shelton Hickerson, a Vietnam veteran, highlights the need for this legislation. Mr. Hickerson spent a number of years fighting his claim for VA disability compensation. Unfortunately, he died on the same day that VA awarded him \$377,342. Because Mr. Hickerson had no dependents, the money owed him remains with VA. In addition to ensuring that the estates of other veterans would be eligible to receive accrued benefits, this legislation would also right the wrong suffered by Mr. Hickerson and his family.

We urge swift passage of this legislation to protect the accrued benefits of veterans like Mr. Hickerson.

To Authorize the Secretary of Veterans Affairs to Enter Into Enhanced-Use Leases for Excess Property of the National Cemetery Administration That is Unsuitable for Burial Purposes (H.R. 4141)

VA's Enhanced-Use Lease (EUL) program allows VA to benefit from the lease of its property for non-VA uses that are compatible with its mission. In 2012, VA's EUL authority was amended to limit EULs to the provision of supportive housing. This legislation would allow VA to enter into EULs for excess property of the National Cemetery Administration (NCA) when that land is deemed unsuitable for burial purposes.

VetsFirst supports allowing EULs for excess NCA property when that property can be used to further VA's mission.

Quicker Veterans Benefits Delivery Act (H.R. 4191)

The VA disability claims backlog is a well-documented problem that continues to persist despite advances by VA in adjudicating older claims. To streamline claims for benefits, VA has sought to standardize the receipt of medical information through the use of Disability Benefits Questionnaires (DBQs). DBQs allow a vet-

¹National Funeral Directors Association, Statistics, <http://nfd.org/about-funeral-service/trends-and-statistics.html>.

eran's physician to provide VA with the information that VA requires to adjudicate a veteran's claim for benefits without requiring a VA medical examination.

Despite efforts to increase acceptance of private medical evidence, problems persist. This legislation would require VA to accept private medical evidence that is competent, credible, probative, and contains the information required to make a decision on a veteran's claim. In addition, this legislation would require VA to provide a report to Congress regarding VA's Acceptable Clinical Evidence initiative. Furthermore, VA would be required to provide an annual report with information about the number of times veterans who submitted private medical evidence are scheduled for exams because the evidence is determined to be unacceptable, the most common reasons why submitted evidence is deemed unacceptable, and the types of disabilities for which claims were most commonly denied when private medical evidence was submitted.

VetsFirst strongly supports efforts to streamline access to VA benefits by ensuring that proper private medical evidence is accepted in the determination of benefits. It is unnecessary to force veterans who submit medical evidence that is sufficient to adjudicate their claims to be subjected to further delays for redundant VA medical exams. We believe that this legislation will help to ensure that private medical evidence is accepted when appropriate.

We are also appreciative of reporting requirements in the legislation that will help to identify problem areas in the use of private medical evidence. Providing information about common reasons why evidence is not accepted will help to pinpoint changes needed to ensure that deficiencies in private medical evidence are remedied where possible. We also support the requirement to evaluate correlations between the rejection of private medical evidence and certain disabilities. We would suggest, however, that this language be amended to reflect a need to know when the evidence is rejected for claims by disability as opposed to by disability when claims that include private medical evidence are denied.

We support this legislation and urge its swift passage.

Thank you for the opportunity to testify concerning VetsFirst's views on these important pieces of legislation. We appreciate your leadership on behalf of our nation's veterans who are living with disabilities. I would be pleased to answer any questions.

Information Required by Clause 2(g) of Rule XI of the House of Representatives

Written testimony submitted by Heather L. Ansley, Vice President of VetsFirst; VetsFirst, a program of United Spinal Association; 1660 L Street NW., Suite 504; Washington, D.C. 20036. (202) 556-2076, ext. 7702.

This testimony is being submitted on behalf of VetsFirst, a program of United Spinal Association.

In fiscal year 2012, United Spinal Association served as a subcontractor to Easter Seals for an amount not to exceed \$5000 through funding Easter Seals received from the U.S. Department of Transportation. This is the only federal contract or grant, other than the routine use of office space and associated resources in VA Regional Offices for Veterans Service Officers that United Spinal Association has received in the current or previous two fiscal years.

Heather L. Ansley is the Vice President of VetsFirst, which is a program of United Spinal Association.

Ms. Ansley began her tenure with the organization in December 2009. Her responsibilities include managing the public policy advocacy, veterans benefits services, and veterans outreach activities for VetsFirst. She also works to promote collaboration between disability organizations and veterans service organizations by serving as a co-chair of the Consortium for Citizens with Disabilities Veterans and Military Families Task Force.

Prior to her arrival at VetsFirst, she served as the Director of Policy and Advocacy for the Lutheran Services in America Disability Network.

Before arriving in Washington, DC, she served as a Research Attorney for The Honorable Steve Leben with the Kansas Court of Appeals. Prior to attending law school, she worked in the office of former U.S. Representative Kenny Hulshof (R-MO) where she assisted constituents with problems involving federal agencies. She also served as the congressional and intergovernmental affairs specialist at the Federal Emergency Management Agency's Region VII office in Kansas City, Missouri.

Ms. Ansley is a Phi Beta Kappa graduate of the University of Missouri-Columbia with a Bachelor of Arts in Political Science. Ms. Ansley also holds a Master of Social Work from the University of Missouri-Columbia and a Juris Doctorate from the Washburn University School of Law in Kansas.

She is licensed to practice law in the State of Kansas and before the United States District Court of Kansas.

PREPARED STATEMENT DIANE M. ZUMATTO, AMVETS NATIONAL LEGISLATIVE DIRECTOR ON: H.R. 2018, H.R. 2088, H.R. 2119, H.R. 2529, H.R. 3671, H.R. 3876, H.R. 4095, H.R. 4102, H.R. 4141 & H.R. 4191

EXECUTIVE SUMMARY

| Bill # | Title/Topic | AMVETS Position |
|-----------|---|-----------------|
| H.R. 2018 | Honor Those Who Served Act of 2013 | Support |
| H.R. 2088 | Claims adjudication centers of excellence | Support |
| H.R. 2119 | Veterans Access to Speedy Review Act | Support |
| H.R. 2529 | Veteran Spouses Equal Treatment Act | Support |
| H.R. 3671 | Expand the eligibility for veteran medallions | Support |
| H.R. 3876 | Burial with Dignity for Heroes Act of 2014 | Support |
| H.R. 4095 | Veterans' Compensation COLA Act of 2014 | Support |
| H.R. 4102 | Deceased veteran benefits | Support |
| H.R. 4141 | Enhanced-use leases for NCA | Support |
| H.R. 4191 | Quicker Veterans Benefits Delivery Act | Support |

Chairman Runyan, Ranking Member Titus and distinguished members of the subcommittee, I appreciate the opportunity to offer our insight into the legislation being considered today, specifically: H.R. 2018; H.R. 2088; H.R. 2119; H.R. 2529; H.R. 3671; H.R. 3876; H.R. 4095; H.R. 4102; H.R. 4141; & H.R. 4191.

H.R 2018

Honor Those Who Served Act of 2013—AMVETS supports this bill which will make it easier to provide headstones for veterans who currently don't have a headstone, or for those whose headstones have deteriorated when there is no Next of Kin available by broadening the definition of those eligible to request a headstone or marker from the VA.

From a preservation or historical point of view, this is a positive step forward in helping to identify and recognize veterans who lack any living relatives or whose relatives are unreachable. The placement of headstones on previously unmarked or illegible veteran graves helps to honor and preserve the individual stories of the brave American heroes from our past.

H.R 2088

A bill to direct the VA to carry out a pilot program to establish claims adjudication centers of excellence—AMVETS supports the concept of this legislation but would suggest 15, rather than 12, adjudication centers of excellence. We believe there should be one center for each of the VA's 15 body systems, which are:

- Musculoskeletal;
- Organs of Special Sense;
- Impairment of Auditory Acuity;
- Infectious Diseases, Immune Disorders & Nutritional Deficiencies;
- Respiratory;
- Cardiovascular;
- Digestive;
- Genitourinary;
- Gynecological Conditions & Disorders of the Breast
- Hemic & Lymphatic;
- Skin;
- Endocrine;
- Neurological Conditions & Convulsive Disorders;
- Mental Disorders; and
- Dental & Oral Conditions

With the institution of this model, gone will be the days of VA raters needing to be 'jacks-of-all-trades and masters of none'. Instead, body system 'experts' will evaluate all claims based on their individual area of expertise. Thanks to the capabilities of the VBMS system (each claim issue is associated with a unique number), claims could be electronically divided up into individual parts or issues, forwarded to the appropriate center of excellence, each issue would then be rated by an expert, after all issues have been rated, the claim can be reassembled and the veteran notified of the outcome. This should go a long way to speeding up the entire claims process.

H.R 2119

Veterans Access to Speedy Review Act—AMVETS supports this legislation which seeks to speed up the veteran appeal process by providing options for the location/

type of hearing, including video conferencing, conducted by the Board of Veterans' Appeals.

H.R 2529

Veteran Spouses Equal Treatment Act—AMVETS supports this legislation because of passage of the Defense of Marriage Act and because it would bring VA policy in line with DoD's on same sex marriage. In June of 2013, Sec. Defense Hagel said, "The Department of Defense intends to make the same benefits available to all military spouses—regardless of sexual orientation—as soon as possible. That is now the law, and it is the right thing to do."

H.R 3671

A bill to expand the eligibility for a medallion or other device furnished by the VA to signify veteran status—AMVETS fully supports this legislation which authorizes the VA to provide a medallion or other device to signify the veteran status of a deceased individual regardless of when the decedent passed away. This memorial device should be available for display on any and all veteran's headstones if desired.

H.R 3876

Burial with Dignity for Heroes Act of 2014—AMVETS whole-heartedly supports this legislation which will provide grants to eligible entities to provide for the cost of burials for homeless veterans with no next-of-kin who are eligible to be buried in national cemeteries. Anyone who has honorably served their country in the Armed Forces should be buried with all appropriate honors and respect regardless of their housing status.

H.R 4095

Veterans' Compensation Cost-of-Living Adjustment Act of 2014—AMVETS supports this legislation which would increase, as of 1 December 2014, the rates of veterans' disability compensation, additional compensation for eligible dependents, the clothing allowance for certain disabled veterans and dependency and indemnity compensation for surviving spouses and children. This country owes an enormous debt of gratitude to those who have served and sacrificed and it is right and just to adequately provide for their on-going needs.

H.R 4102

A bill to clarify that the estate of a deceased veteran may receive certain accrued benefits upon the death of the veteran—AMVETS supports this legislation.

H.R 4141

A bill to authorize the VA to enter into enhanced-use leases for excess property of the National Cemetery Administration that is unsuitable for burial purposes—AMVETS fully supports this legislation which seeks to extract monetary or in-kind value from unusable, excess property located within the boundaries of the National Cemetery System. Careful and creative stewardship of federal resources which encourage public/private ventures and enhance the ambience of our national cemeteries should be encouraged. Furthermore, land that would otherwise serve no purpose would not only bring in revenue while maximizing the overall usage of the land, but would also contribute to the mission of the NCA.

H.R 4191

Quicker Veterans Benefits Delivery Act—AMVETS support this legislation which would improve the treatment of medical evidence provided by non-VA medical professionals in support of claims for disability compensation. Appropriate evidence, obtained by from a medical specialist or expert that is competent, credible and probative, on a physical or mental health condition should be admissible and accepted by the VA. This step should help move claims more quickly through the VA system.

This concludes my testimony and I look forward to answering your questions.

21 March 2014

The Hon. Jon Runyan, Chairman

U.S. House of Representatives, Veterans' Affairs Committee

Subcommittee on Disability Assistance & Memorial Affairs

Washington, D.C. 20510

Dear Chairman Runyan:

Neither AMVETS nor I have received any federal grants or contracts, during this year or in the last two years, from any agency or program relevant to the 12 March 2014, House Veterans Affairs Committee hearing on the U.S. Department of Veterans Affairs Budget Request for Fiscal Year 2015.

Sincerely,

Diane M. Zumatto,

AMVETS NATIONAL LEGISLATIVE DIRECTOR

Biographical Sketch: Diane M. Zumatto of Spotsylvania, VA joined AMVETS as their National Legislative Director in August 2011. Ms. Zumatto, a native New Yorker and the daughter of immigrant parents decided to follow in her family's footsteps by joining the military. Ms. Zumatto is a former Women's Army Corps (WAC) member who was stationed in Germany. Zumatto was married to a CW4 aviator in the Washington Army National Guard and is the mother of four adult children. Ms. Zumatto is extremely proud that two of her children have chosen to follow her footsteps into military service.

Ms. Zumatto has more than 20 years of experience working with a variety of non-profits in increasingly more challenging positions, including: the American Museum of Natural History; the National Federation of Independent Business; the Tacoma-Pierce County Board of Realtors; the Washington State Association of Fire Chiefs; Saint Martin's College; the James Monroe Museum; the Friends of the Wilderness Battlefield and the Enlisted Association of the National Guard of the United States. Diane's non-profit experience is extremely well-rounded as she has variously served in both staff and volunteer positions including as a board member and consultant.

After receiving her B.A. in Historic Preservation from the University of Mary Washington in 2005, Diane decided to diversify her experience by spending some time in the 'for-profit' community. Realizing that her creativity, energy and passion were not being effectively challenged, she left the world of corporate America and returned to non-profit organization.

AMVETS National Headquarters, 4647 Forbes Boulevard Lanham, Maryland 20706-4380, Business Phone: (301) 683-4016 dzumatto@amvets.org

PREPARED STATEMENT OF ZACHARY HEARN, DEPUTY DIRECTOR FOR CLAIMS OF THE VETERANS AFFAIRS AND REHABILITATION COMMISSION OF THE AMERICAN LEGION ON PENDING LEGISLATION

Chairman Runyan, Ranking Member Titus and distinguished Members of the Subcommittee, on behalf of Commander Dellinger and the 2.4 million members of The American Legion, I thank you and your colleagues for the work you do in support of our service members and veterans as well as their families. The hard work of this Subcommittee in creating significant legislation has left a positive impact on our military and veterans' community.

H.R 2018: HONOR THOSE WHO SERVED ACT OF 2013

To amend Title 38, United States Code, to identify the persons who are eligible to request headstones or markers furnished by the Secretary of Veterans Affairs, and other purposes.

This legislation expands the allowable persons who may request headstone markers commemorating deceased veterans to indicate their veteran status to include military researchers, local historians and the like. In many cases, long removed from the period of service, veterans from prior wars may not have recognition of their service on their headstone markers. Concerned citizens may seek to ensure those veterans receive their proper honors and recognition.

The American Legion has been supportive of ensuring all veterans, even those who have been forgotten by time, receive the honors due to them according to their service.¹ Veterans who have served their country deserve to be buried with respect and honors. This legislation would help aid in that recognition.

The American Legion supports the passage of this legislation.

H.R 2088

To direct the Secretary of Veterans Affairs to carry out a pilot program to establish claims adjudication centers of excellence.

In order to address the backlog of veterans' disability claims and to prevent future such backlogs, this legislation aims to create multiple "Centers of Excellence" (COEs) as pilot programs throughout the Department of Veterans Affairs (VA) Veterans Benefits Administration (VBA). The program would set aside twelve VA Regional Office (VARO) claims adjudication centers, designated as the three highest performing VAROs in each of the four areas of the VBA. Performance in these offices would be based on a measurement of quality and accuracy as well as average number of days pending.

¹ Resolution 24 "Identify, Honor and Inter Unclaimed Remains of Veterans" MAY 2007

Each COE would focus on one medical condition selected by the Secretary, attempting to address conditions that are the most complex and time consuming, provided they occur commonly enough to support the work of the centers. One would assume these conditions would include medical issues such as Posttraumatic Stress Disorder (PTSD), Traumatic Brain Injury (TBI), Gulf War Illnesses, Diabetes, and other multi-symptomatic disorders. If working these claims did not engulf all of the employees' time, they would be permitted to adjudicate other claims.

Employees at the COEs would receive special, targeted training and undergo examinations to certify expertise.

The aim of improving the quality of decisions, particularly on complex conditions, is admirable. The American Legion certainly thinks some of the notions included in this legislation, such as targeted training for areas of special complexity concurrent with expertise certifying examinations, have promise for improving VBA's overall quality in adjudicating claims.

However, The American Legion is deeply concerned that the consolidation of work at these COEs is the wrong path, as evidenced by nearly every previous time VA has attempted to improve the system by consolidating efforts.

In January 2002, VBA consolidated the work of pension into three Pension Maintenance Centers (PMCs) in St. Paul, Milwaukee and Philadelphia. Rather than improving speed and accuracy of pension claims, backlogs have become the norm. American Legion service officers used to be able to walk upstairs to talk to VBA employees and come to a quick resolution for pension applicants (who are perhaps the most vulnerable and financially imperiled of veterans). Once consolidated into centers, communication became nearly impossible. Even with service officers co-located in the PMCs, it can be difficult to work through issues by communicating with VA employees. The problem has only been compounded by adding death benefits to the work of these centers.

In recent years, the influx of Nehmer claims related to the addition of new Agent Orange presumptive conditions prompted VBA to consolidate work on the Nehmer claims. Despite this consolidation, VA officials came before Congress many times to point out how the entire system of benefits claims had been set back. The large delays and increases in the backlog were blamed on the Nehmer claims, even though they had been consolidated to centralize processing, ostensibly to alleviate just these concerns.

Time and time again, consolidation has not worked and has not been beneficial. By reducing the ability of top offices to have these excellence teams work on claims outside the purview of their specific medical issue, VBA would be forced to broker more work. Amongst The American Legion's cadre of over 2,900 accredited service officers, brokering is universally hailed as one of the worst programs utilized by VBA to address the backlog. All brokering does is create more barriers to communication, and throw up more roadblocks in the path of success.

During the development of the Veterans Benefits Management System (VBMS) VBA officials assured stakeholders that their service officers would see improved communications with VA on veterans' claims by utilizing electronic message systems within VBMS. We were told we could call out specific notes in a veteran's file and communicate directly back and forth to address issues. Needless to say, this functionality is not currently present in the system.

Taking some of the most critical claims out of the VAROs and away from the strong communication between VA employees and service officers to resolve difficulties with claims, would be a step back in the move to improve the claims process.

The American Legion supports efforts to improve the claims processing system, and applauds the ideas included in this legislation to develop specialized training on the most complicated issues. Training, with the critical feedback mechanism of testing for expertise certification, could benefit not just employees in a few centers of excellence, but employees in all regional offices. Consolidating these employees is not a solution The American Legion can support however. These changes need to be implemented universally across the entire system.

The American Legion does not support the passage of this legislation.

H.R 2119: VETERANS ACCESS TO SPEEDY REVIEW ACT

To amend Title 38, United States Code, to improve the opportunity for veterans to use video conferencing for hearings before the Board of Veterans' Appeals.

A veteran who has appealed their disability claim to the Board of Veterans' Appeals (BVA) is entitled to have their case heard before the presiding authority, a veterans' law judge (VLJ). These hearings can be conducted in a variety of manners. They could be a physical, in person hearing at the BVA in Washington, DC. They could be a traveling Board hearing, where a VLJ physically travels to a VA Regional Office (VARO) to conduct a series of hearings. It could also take the form of a video-

teleconference (VTC) hearing. This legislation, in the interest of improving scheduling times, would allow the BVA to determine what the speediest option for providing that hearing would be, and allows veterans to petition BVA for a different type if that is their choice. If the veteran petitions for a different type, the bill states the BVA “may” grant such request.

The American Legion has several concerns about this process. We are certainly sympathetic to the problems of scheduling, which lead to long delays. American Legion service officers report that travel board hearings often take place in a once yearly window, which greatly adds to delays in the appeals process. It is not always practical for a veteran to travel to Washington, DC, although that may be an excellent option for veterans who happen to live on the Eastern seaboard.

For some veterans, especially those of an older generation including Korean War and World War II veterans, meeting with people face to face matters. It is perhaps ironic that those veterans, who may have the least time to wait, often must wait longest for their hearings to take place. In person hearings can make a difference, especially in certain cases including mental disorders, certain visible physical disabilities, and skin disorders may not translate as well to video. American Legion service officers have noted that despite the roll out of the Veterans Benefits Management System (VBMS) they do not always have access to a claims file to review to prepare for accompanying veterans to the VTC hearings. Conducting a hearing in which a veteran’s advocate does not have full access to the information in the claims file is not in the best interest of the veteran, nor is it the full due process to which that veteran is entitled.

Obviously, given time, VA may reach a point with VBMS that alleviates concerns about access to a veteran’s file. They are not at that point currently. With perhaps further clarification, the provision of this bill which allows for veterans to appeal for an in person hearing if they so choose could allow for veterans to get the hearing that is right for them. As the provision currently states the BVA “may” grant such a request, The American Legion is concerned this review process may be conducted not with the interests of what is best for the veteran in mind, but what is best for BVA. That cannot be the aim.

It is the understanding of The American Legion that the bill could be amended to change the “may” language to “shall” language. Such a change would ensure a new system that provides more timeliness to the process by allowing the BVA to set the fastest default venue for the veteran’s hearing, but fully protect veterans who choose a different venue with full knowledge that their choice would add time to their process, but still meet the criteria best suited to that individual veteran.

The claims system is designed to serve veterans who have been disabled. While measures that make things easier for VA may ultimately help veterans, we must always be mindful of putting the needs of the veterans first. The American Legion agrees there may be ways to improve speed and provide incentives for veterans to utilize a system that takes advantage of technology to assist them in a more timely decision on their appeal. However, the rights of the veteran to receive their time before a judge, to have a human being hear their words describing how they came to be disabled in service to this country—that right must be protected. The American Legion would like to work in concert with the committee and VA to find a way to implement improvements to the process, but ensure that this is done in a way mindful of fully protecting the rights of the veteran appellants.

The American Legion supports the passage of this legislation (with the noted reservation).

H.R 2529: VETERAN SPOUSE EQUAL TREATMENT ACT

To amend Title 38, United States Code, to amend the definition of the term ‘spouse’ to recognize new State definitions of such term for the purpose of the laws administered by the Secretary of Veterans Affairs.

The American Legion is a grass roots organization that derives its operational mandate from resolutions passed by membership. The American Legion has no resolution addressing this legislation.

The American Legion has no position on this legislation.

H.R 3876: BURIAL WITH DIGNITY FOR HEROES ACT OF 2014

To amend Title 38, United States Code, to direct the Secretary of Veterans Affairs to carry out a grant program to provide burials for homeless veterans.

This legislation proposes a grant program to provide for the burial in national cemeteries of homeless veterans with no next of kin. The American Legion has a long history of ensuring all of our nation’s heroes receive the honors they deserve in burial. Since 2007, The American Legion has worked with the Missing in America Project (MIAP) to locate, identify and inter the unclaimed remains of American vet-

erans through a variety of means. During the past seven years, veterans have worked with state, local and federal authorities to ensure no one is left behind.² Furthermore, The American Legion has been deeply involved in reducing the national scourge of veteran homelessness, assisting the efforts of VA and other agencies to bring the numbers down to fewer than 58,000 homeless veterans from figures totaling more than 75,000 veterans in 2010.

The American Legion has long been supportive of efforts to reach out to homeless veterans, as well as efforts to provide recognition and honors to the forgotten fallen.

The American Legion supports the passage of this legislation.

H.R 4095: VETERANS COMPENSATION COST-OF-LIVING ADJUSTMENT ACT OF 2014

To increase, effective as of December 1, 2014, the rates of compensation for veterans with service-connected disabilities and the rates of dependency and indemnity compensation for the survivors of certain disabled veterans, and for other purposes.

The American Legion strongly supports a periodic cost-of-living adjustment (COLA) for veterans reflective of increased expenses due to inflation and other factors. However, there are many factors currently being considered regarding the calculation of COLA that merit discussion.

Within The American Legion's Code of Procedures, accredited representatives are advised under no circumstances should they cause harm to veterans' claims for benefits. Current provisions contained in the President's 2014 proposed budget, as well as in amendments to other bills that have been introduced from time to time, would replace the current Consumer Price Index (CPI) used to calculate increases to Social Security COLA with a so-called Chained CPI (C-CPI). Through chaining VA benefits to the new C-CPI and COLA for Social Security benefits, the veteran community would indeed be harmed. On December 19, 2012, Dean Stoline, Deputy Director of The American Legion Legislative Division, stated that a chained CPI is misguided policy and "would have significant deleterious effect on the benefits of millions of veterans".

There is a long term negative effect upon the veteran community should Congress mandate a C-CPI approach to determining COLA increases. According to a press release from Sen. Sanders' office, the proposal would cut VA disability benefits for a 30-year-old veteran by more than \$13,000 a year by age 45, \$1,800 a year by age 55, and \$2,260 a year by age 65. Senior citizens who retire by age 65 would see their Social Security benefits reduced by about \$650 a year by the time they reach 75, and more than \$1,000 a year when they turn 85.³ These cuts would certainly place many veterans and their families' economic security in peril.

By resolution⁴ "The American Legion support[s] legislation to amend Title 38, United States Code, section 1114, to provide a periodic COLA increase and to increase the monthly rates of disability compensation; and . . . oppose[s] any legislative effort to automatically index such [COLA] adjustments to the [COLA] adjustment for Social Security recipients, non-service connected disability recipients and death pension beneficiaries." The opposition to direct and automatic connection to the Social Security policies reflects the understanding that veterans and specifically disabled veterans represent a unique subsection of the American community, and their unique concerns should receive individual consideration when determining the need for periodic increases for cost of living.

The American Legion also raises objection to the practice of "rounding down" to the next lower whole dollar amount as noted in Section 2(c)(2). The American Legion does not support this policy of shortchanging America's veterans.

The American Legion encourages Congress to seriously examine the disastrous long term negative consequences of C-CPI for veterans. The long-term negative effects created through permitting C-CPI for VA benefits could cause serious financial harm to millions of veterans.

The American Legion supports an increased Cost-of-Living Adjustment for veterans, but would like to see the legislation amended to ensure veterans' COLA is protected from being changed to reflect a C-CPI model to the detriment of disabled veterans.

H.R 4102

²Resolution 24 "Identify, Honor and Inter Unclaimed Remains of Veterans" MAY 2007.

³<http://www.sanders.senate.gov/newsroom/press-releases/statement-by-senator-bernard-sanders-on-the-chained-cpi>.

⁴Resolution No. 178: Department of Veterans Affairs (VA) Disability Compensation, AUG 2012.

To amend Title 38, United States Code, to clarify that the estate of a deceased veteran may receive certain accrued benefits upon the death of the veteran, and for other purposes.

This legislation would clarify the process of substitution in the case of a veteran's claim where the veteran passes away before final adjudication of the claim. The American Legion is a grass roots organization that derives its operational mandate from resolutions passed by membership. The American Legion has no resolution addressing this legislation.

The American Legion has no position this legislation.

H.R 4141

To amend Title 38, United States Code, to authorize the Secretary of Veterans Affairs to enter into enhanced-use leases for excess property of the National Cemetery Administration that is unsuitable for burial purposes.

The American Legion recognizes there are situations in which land owned or controlled by the Department of Veterans Affairs is not suitable for the purposes it was intended for. However, The American Legion also believes it is important that Congress restrict Enhanced Use Leasing (EUL) authority to "a priority list of services that will meet the needs of the veteran community"⁵

This legislation, affecting only excess property unsuitable for burial for National Cemetery Administration (NCA) purposes, is acceptable in that it does not adversely impact capacity of the NCA for burial.⁶ Section 1(a)(2)(B) amends the EUL authority to include "other purposes." The American Legion would want it noted, in accordance with Resolution 129 as noted above, that these "other purposes" must adhere to a list of services that meet the needs of the veterans' community. While EUL is a vital tool and can be helpful to VA operations overall, it must be in the service of veterans.

The American Legion supports (with noted reservation) the passage of this legislation.

H.R 4191: QUICKER VETERANS BENEFITS DELIVERY ACT

To amend Title 38, United States Code, to improve the treatment of medical evidence provided by non-Department of Veterans Affairs medical professionals in support of claims for disability compensation under the laws administered by the Secretary of Veterans Affairs, and for other purposes.

This legislation aims to improve how private medical evidence submitted by veterans is handled within the VA claims system. The bill provides a better definition of "sufficient complete" medical evidence, and importantly alters VA's authority from the current state where the VA "may" accept the evidence to a state where the VA "shall" accept the evidence. The bill also calls for a report on the progress of the Acceptable Clinical Evidence Initiative.

The American Legion has over 2,900 accredited service officers nationally assisting veterans with their claims. A large percentage of those service officers report frustrations as VA routinely ignores favorable private medical evidence submitted by the veteran and instead schedules unnecessary exams. These VA exams contribute to the backlog of claims by causing needless delays. When the medical evidence of record submitted by the veteran is sufficient to grant a claim, the veteran shouldn't have to wait through months of backlogged appointment slots to get an appointment with a doctor who will see her for a brief exam. Veteran's own physicians spend years treating the veteran and interacting with them. They provide critical insight into the overall health picture of the veteran. With the proper use and acceptance of private medical evidence, VA can reduce much of the necessary waiting time in the claims process and deliver decisions to veterans utilizing the private evidence that are more timely and more accurate.

There is one additional item pursuant to private medical evidence The American Legion believes it is important to raise. Currently, under VHA Directive 2007-024, if a veteran's primary care provider is a VHA physician, that physician's assistance is limited to "recording of observations on the current medical status of the veteran found in the medical record, including their current functional status." The American Legion believes private medical opinions are extremely helpful to the process, and would urge for Directive 2007-024 to be amended to specifically allow VA pri-

⁵ Resolution 129 "The Department of Veterans Affairs Enhanced-Use Leasing" AUG 2012.

⁶ Resolution 175 "National Cemetery Administration"

mary care physicians to provide supporting medical opinions, including opinions related to causation of a condition, when it is medically possible to do so.⁷

The American Legion supports the passage of this legislation.

PREPARED STATEMENT OF MR. ANTHONY A. WALLIS ON H.R. 2018, H.R. 2088, H.R. 2119, H.R. 2529, H.R. 3971, H.R. 3876, H.R. 4095, H.R. 4102, H.R. 4141 AND H.R. 4191

The Association of the United States Navy (AUSN) continues its mission as the premier advocate for our nation's Sailors and Veterans alike. Formerly known as the Naval Reserve Association, which traces its roots back to 1954, AUSN was established on 19 May 2009 to expand its focus to the entire Navy. AUSN works for not only its members but for the Navy and Veteran community overall by promoting the Department of the Navy's interests, encouraging professional development of officers and enlisted and educating the public and political bodies regarding the nation's welfare and security.

AUSN prides itself on personal career assistance to its members and successful legislative activity on Capitol Hill regarding equipment and personnel issues. The Association actively represents its members by participating in the most distinguished groups protecting the rights of military personnel. AUSN is a member of The Military Coalition (TMC), a group of 34 associations with a strong history of advocating for the rights and benefits of military personnel, active and retired. AUSN is also a member of the National Military Veterans Alliance (NMVA) and an associate member of the Veterans Day National Committee of the Department of Veterans Affairs (VA).

The Association's members include Active Duty, Reserve and Veterans from all 50 states, U.S. Territories, Europe, Asia, South America and Australia. AUSN has 81 chapters across the country. Of our over 22,000 members, approximately 80% are Veterans. Our National Headquarters is located at 1619 King Street in Alexandria, Virginia, and we can be reached at 703-548-5800.

AUSN Leadership Contact Information:

National President: DKCM Charles Bradley, U.S. Navy (Ret.),
charles.bradley@ausn.org

National Chairman of the Board: RADM Steve Israel, U.S. Navy (Ret.),
steve.israel@ausn.org

National Vice Chairman of the Board: MCPON Jim Herdt, U.S. Navy (Ret.),
jim.herd@ausn.org

Executive Director: VADM John Totushek, U.S. Navy (Ret.),
john.totushek@ausn.org

Legislative Director: Mr. Anthony Wallis, *anthony.wallis@ausn.org*

SUMMARY

Chairman Runyan, Ranking Member Titus and Members of the House Veterans' Affairs Committee, Subcommittee on Disability Assistance and Memorial Affairs, the Association of the United States Navy (AUSN) thanks you and your Committee for the work that you do in support of our Navy, retirees and Veterans, as well as their families. Your efforts have allowed significant progress in creating legislation that has left a positive impact on our military and Veteran community.

This Committee has been, and continues to be, the starting point for legislation that provides appropriate adjustments for Veteran disability compensation rates. Last year, in April 2013, this Committee swiftly passed H.R. 569 which was later passed into law as S. 893, the Veterans' Compensation Cost-of-Living Adjustment Act of 2013 (P.L. 113-52). This regular Veterans' Cost of Living Adjustment Act (COLA), which increased the rate of Veterans disability compensation and Dependency and Indemnity Compensation (DIC) for surviving spouses and children by 1.5 percent beginning 1 January 2014, was welcomed by AUSN and the Veteran community.

AUSN is pleased to have the opportunity to speak in support of this year's bill, H.R. 4095, the Veterans' Compensation Cost-of-Living Adjustment Act of 2014, and many others being discussed in today's hearing. AUSN's positions on the bills being discussed today are as follows:

H.R. 2018: THE HONOR THOSE WHO SERVED ACT

⁷Resolution 24 "Medical Opinions Provided by the Department of Veterans Affairs (VA) Primary Care Providers" OCT 2008

The Department of Veterans Affairs (VA) furnishes upon request, at no charge to the applicant, a Government headstone or marker for the unmarked grave of any deceased eligible Veteran in any cemetery around the world, regardless of his or her date of death. The VA may also furnish a headstone or marker for graves that are marked with a private headstone or marker for Veterans that died on or after 1 November 1990. For Veterans that served prior to World War I, a grave is considered marked when a headstone/marker displays the decedent's name only or if the name was historically documented in a related document, such as by a number that is inscribed on a grave block and is recorded in a burial ledger. For service during and after World War I, a grave is considered marked if a headstone/marker displays the decedent's name and date of birth and/or death, even though the Veterans military data is not shown. When burial or memorialization is in a national cemetery, state Veterans cemetery or military post/base cemetery, a headstone or marker will be ordered by the cemetery officials based on inscription information provided by the next of kin or authorized representative.

Those eligible for a headstone or marker include, but are not limited to, any deceased Veteran discharged under honorable conditions and any member of the Armed Forces of the United States who dies on Active Duty. A copy of the deceased Veterans discharge certificate (DD-214 Form or equivalent) or a copy of other official document(s) establishing qualifying military service must be attached.

However, as for those applying for a headstone or marker, in 2012 the VA put into place a new regulatory barrier. Federal regulation defines "applicant" as the decedent's Next-of-Kin (NOK), a person authorized in writing by the NOK, or a personal representative authorized in writing by the decedent. Written authorization must be included with claim. Final approval from the NOK is necessary to receive a headstone for a deceased Veteran, but this may be difficult if NOK cannot be determined or is separated in family lineage or by generations.

On the other hand, there are researchers, like those at various State Historical Societies, who explore archives, death records, military records and genealogical records to determine the identity of Revolutionary and Civil War soldiers buried in unmarked graves. These groups then will work to find the NOK, but, sometimes, that is not possible when today's headstone applicants are several generations removed from past conflicts such as the Civil War.

This bill, H.R. 2018, the Honor Those Who Served Act, introduced by Representative Steve Stivers (R-OH-15), Representative Pat Tiberi (R-OH-12) and Representative Joyce Beatty (D-OH-03) would stipulate that if the NOK cannot be found then headstone applications may be filed with the VA by: the state Veterans service agency, military researchers, local historians, genealogists or others familiar with research sources or methods needed to prove a Veteran's identity.

AUSN supports this legislation, which seeks to help streamline applications for headstones or markers, especially for those who served in many past conflicts that helped shape our nation, so they may be properly honored for their service and not recognized just because of deterioration of graves or the inability to determine the NOK. Our Veterans, current and past generations, deserve better than unmarked or deteriorated graves. AUSN supports this bill which will remedy this problem through the use of existing quality research institutions and methods in this country.

H.R. 2088: A BILL TO DIRECT THE SECRETARY OF VETERANS AFFAIRS TO CARRY OUT A PILOT PROGRAM TO ESTABLISH CLAIMS ADJUDICATION CENTERS OF EXCELLENCE

The Department of Veterans Affairs (VA) receives about 1.25 million claims for Veterans disability benefits per year. As identified by the VA, for a Veteran to qualify within backlog, the claim must be waiting 125 days or more for the VA to process. As of the most recent 2014 quarterly report of the Veterans Benefits Administration (VBA), there are over 636,000 claims pending and over 384,000 in backlog. (<http://www.vba.va.gov/REPORTS/mmwr/#characteristics>). It is known, however, that some of the VA's Regional Offices (ROs) have been better suited at handling and dealing with Veteran disability claims than others, whereby some have received complaints that the personnel at these ROs have been unable to handle or, in some cases, properly file a disability claim. For instance, last month, at an RO in Seattle, Washington, VA staff was known to have interfered with an external non-VA performance review performed by a Veteran Service Organization (VSO) checking on how well the VA processes disability claims. For these prearranged visits, VSO representatives ask for a random sampling of recently processed disability claims for review with VA officials. They also meet confidentially with non-management staff to discuss any issues and concerns. However in this instance, the RO was not cooperative, and the Chairman of the House Veterans' Affairs Committee, Representative Jeff Miller (R-FL-01), asked for an investigation and assistance with external

reviews. VA Regional Offices need to be improved, and those that do perform well and are cooperative in the effort to reduce the claims backlog need their efforts replicated with those ROs that fail to meet both internal VA and external review criteria.

H.R. 2088, creating Claims Adjudication Centers of Excellence, introduced by the Ranking Member of the House Veterans' Affairs Committee, Representative Michael Michaud (D-ME-02), would require the VA to boost support for the best performing Regional Offices, in order to focus additional attention on the most complex and time consuming medical conditions. In particular, the bill directs the Secretary of Veterans Affairs to carry out a three-year pilot program to establish 12 VA claims adjudication Centers of Excellence by selecting the three highest performing regional offices in each of the four areas of the Veterans Benefits Administration (VBA), requiring each Center to focus on adjudicating claims relating to one medical condition selected by the Secretary. Furthermore, the bill provides for appropriate employee specialized training with respect to such medical conditions and prohibits any employee from working concurrently at more than one center. However, it allows an employee to move from one center to another, as long as the employee receives the training appropriate for that center.

AUSN recognizes and appreciates H.R. 2088's intent to establish this pilot program in order to utilize the highest performing offices to adjudicate the most difficult medical conditions, such as Post-Traumatic-Stress-Disorder (PTSD) and Traumatic Brain Injury (TBI). AUSN also is appreciative of efforts to encourage the VA to specialize claims processing by condition, reduce the time it takes to adjudicate these conditions and decrease the error rates on difficult claims within ROs. By improving the quality and specialization of claims processing at these ROs and establishing these claims Centers of Excellence, the VBA will be able to focus and see how these specialized ROs function. The VBA can then copy and implement these models for ROs that are failing in their standards and services to process claims for our Veterans.

However, AUSN believes that this pilot program should not distract from the overall goal of eliminating the claims backlog or marginalize existing ROs by shifting quality staff and Full Time Employees (FTEs) from one RO to these Centers of Excellence. As a result, AUSN believes further action on this bill should continue to be mindful of the overall goal of ending the claims backlog and improving all ROs throughout the country.

H.R. 2119: THE VETERANS ACCESS TO SPEEDY REVIEW ACT

Oftentimes, when a Veteran decides to file an appeal on a claim, the Veteran must appear before a Board of Appeals to state his or her case. In certain instances, a significant burden is placed on Veterans having to travel for appeal hearings in person. Many times, this travel comes at a great physical and financial cost to the Veteran, particularly if the Veteran resides a far distance from where the appeal hearing is being held.

H.R. 2119, the Veterans Access to Speedy Review Act, introduced by Representative Raul Ruiz (D-CA-36), would require the VA's Board of Veterans Appeals to offer alternative sites and/or technical modalities to Veterans for their appeal hearings, if these alternatives allow earlier scheduling of the hearing than otherwise would be scheduled. In order to ensure a Veteran can have their appeal at the earliest possible date, the bill requires the Board of Veterans Appeals to determine whether to hold the hearing at its principal location or at another VA facility or other Federal facility and then whether the Veteran must be present or can attend through the use of videoconferencing. It also provides the Veteran making the appeal the freedom to request a different type of hearing or a different time or location.

AUSN supports H.R. 2119, which seeks to provide more options to Veterans to ease the process of appealing a claim by making available additional means by which a Veteran can appear before a Board of Appeals. This is allowed through the use of expansion of available locations for such an appeal to occur or through teleconferencing capabilities. As a result, according to the VA, this legislation would reduce costs for both the VA and Veterans. In addition, AUSN supports language changes through an amendment being offered whereby, "If so requested, the Board SHALL grant such requests and ensure that the hearing is scheduled at the earliest possible date without any undue delay or other prejudice to the appellant," thus providing more flexibility for the Veteran when addressing his or her claims appeal.

H.R. 2529: THE VETERAN SPOUSES EQUAL TREATMENT ACT

H.R. 2529, the Veteran Spouses Equal Treatment Act, amends the definition of "spouse" for purposes of Veterans benefits provisions to require an individual to be

considered a spouse if the marriage of the individual is valid in the state or territory in which the marriage was entered into or, in the case of a marriage entered into outside any state or territory, if the marriage is valid in the place in which the marriage was entered into and the marriage could have been entered into in a state or territory.

AUSN, at this time, does not take a position on H.R. 2529 due to insufficient feedback from our own membership.

H.R. 3671: Amending Title 38 United States Code (USC) To Expand the Eligibility for a Medallion Furnished by the Secretary of Veterans Affairs to Signify the Veteran Status of a Deceased Individual

Currently, Section 2306(d)(4) of Title 38, United States Code, provides that, when requested, the Secretary of Veterans Affairs will provide an appropriate government headstone, marker or medallion at the expense of the United States for certain Veterans. From 18 October 1978 until 31 October 1990, the VA paid headstone and marker allowances to surviving families for purchase of private headstones and markers on behalf of Veterans who were interred in private cemeteries in lieu of the VA providing a government headstone or marker. This benefit was eliminated on 1 November 1990; accordingly, from 2 November 1990 through 11 September 2001, whereby the VA paid no assistance in the purchase of a private headstone or marker for Veterans qualified for burial in a national or state Veterans' cemetery. Between 2001 and 2006, as a pilot program, the VA provided government headstones and markers to qualifying Veterans regardless of whether or not they had privately purchased a headstone. In 2007 the VA made this program permanent and included a medallion as an alternative option, retroactive to 1 November 1990 for those Veterans who died on or after that date to affix the medallion to a grave marker.

Today, many Veterans and their loved ones do not understand why they do not qualify for the medallion, leaving the 1 November 1990 date as just an arbitrary starting point for the new medallion affixation benefit. Accordingly, the VA has submitted a request in the form of a legislative proposal to remove the 1 November 1990 date as a requirement for eligibility for a medallion to be requested to be affixed to an existing headstone or marker.

H.R. 3671, introduced by House Veterans' Affairs Committee Chairman, Representative Jeff Miller (R-FL-01), which would expand the eligibility for the medallion to be furnished by the VA for all Veterans whose families wish to have a medallion recognizing Veteran status affixed to an existing headstone or marker. This would also eliminate the 1 November 1990 date which is the current existing 'benchmark' for qualification for the medallion. In an October 2013 briefing with the VA's Under Secretary for Memorial Affairs, Mr. Steve L. Muro, the eligibility issue for the medallion benefit was further discussed, including the 1 November 1990 date of eligibility. Under Secretary Muro reiterated the VA's support for eliminating this date in order to qualify for this benefit. Accordingly, Chairman Miller's bill, H.R. 3671, would remedy this situation.

AUSN supports H.R. 3671, which eliminates the 1 November 1990 date of eligibility and expands the qualifications for affixing a Veteran status medallion to an existing Veteran headstone or marker. AUSN is happy to join other Veteran Service Organizations (VSOs), as well as the VA which has previously expressed support for eliminating the 'on or after' date of 1 November 1990 to qualify for a Veteran status medallion for a headstone or marker.

H.R. 3876: THE BURIAL WITH DIGNITY FOR HEROES ACT OF 2014

The Department of Veterans Affairs (VA) has stated that the nation's homeless Veterans are predominantly male, with roughly 8% being female. The majority of homeless Veterans are single; live in urban areas; and suffer from mental illness, alcohol and/or substance abuse or co-occurring disorders. About 12% of the total adult homeless population is Veterans. Roughly 40% of all homeless Veterans are African American or Hispanic, despite only accounting for 10.4% and 3.4% of the U.S. Veteran population, respectively according to the National Coalition for Homeless Veterans. Homeless Veterans are also younger on average than the total Veteran population, with approximately 9% between the ages of 18 and 30, and 41% between the ages of 31 and 50. On the other hand, only 5% of all Veterans are between the ages of 18 and 30 and less than 23% are between 31 and 50.

How many homeless Veterans are there? Although flawless counts are impossible to come by, the transient nature of homeless populations presents a major difficulty. However, the U.S. Department of Housing and Urban Development (HUD) has estimated that 57,849 Veterans are homeless on any given night. Approximately 12,700 Veterans of Operation Enduring Freedom (OEF), Operation Iraqi Freedom (OIF)

and Operation New Dawn (OND) were homeless in 2010. In addition, about 1.4 million other Veterans are considered at risk of homelessness due to poverty, lack of support networks and dismal living conditions in overcrowded or substandard housing. As a result of the transient nature of homeless populations and lack of proper identification or information, it is difficult to determine next-of-kin (NOK) when a homeless Veteran has passed. There are institutions, however, that exist to help honor and recognize the service of deceased homeless Veterans, such as the Dignity Memorial Homeless Veterans Burial Program (<http://www.dignitymemorial.com/en-us/about-us/one-thousand-veterans-burial.page>). The Dignity Memorial Homeless Veterans Burial Program has provided military burials and services for homeless and indigent Veterans since 2000 and has worked with National Veterans Cemeteries around the country to provide more than 1,000 Veterans with the recognition and honor they are due.

H.R. 3876, the Burial with Dignity for Heroes Act, introduced by Representative Al Green (D-TX-09) along with Representative Corrine Brown (D-FL-5) and Representative John Lewis (D-GA-5), would direct the Secretary of Veterans Affairs to carry out a program to make grants to eligible entities to provide for the cost of burials for homeless Veterans who: (1) Are eligible to be buried in a National Cemetery and (2) are determined by the Secretary to have no next-of-kin (NOK).

AUSN recognizes and appreciates the intent of H.R. 3876, however, it remains uncertain as to the impact the legislation would have upon the VA and its resources, especially in the determination and availability of grant money to fund the program. Despite this concern, AUSN is sympathetic to the important issue of providing for proper burials and memorials for our nation's homeless Veterans and looks forward to ensuring that those deceased homeless Veterans get the recognition of their service, sacrifices and honor that they so deserve. AUSN stands ready to help remedy this problem, as well as the challenges faced to combat Veteran homelessness.

H.R. 4095: THE VETERANS' COMPENSATION COST-OF-LIVING ADJUSTMENT (COLA) ACT OF 2014

The Department of Veterans Affairs (VA) receives about 1.25 million claims for Veterans disability benefits per year. As it exists today, a disability rating is assigned a percentage by the VA after a physical examination for all areas of the body for which the Veteran is claiming disability. However, a cash benefit is only provided to Veterans with a rating of 10 percent or more. The basic benefit amount ranges from \$127 to \$2,769 a month, depending on the disability rating. However, given the economic situation faced by many of our Veterans, this compensation may not be adequate to meet their needs, as costs of living continue to rise. The unique circumstances that arise in the retirement years of a career servicemember, especially if those servicemembers suffer from service-connected disabilities or other ailments that require dependency or indemnity compensation (DIC), often require that their benefits be adjusted to the ever rising cost-of-living. Annual COLA increases are necessary to ensure that our nation's servicemembers' retirement benefits reflect the current fiscal environment.

AUSN was pleased to see S. 893, the Veterans' Compensation Cost-of-Living-Adjustment (COLA) Act, companion legislation to H.R. 569, passed into law (P.L. 113-52), whereby the rates of Veterans disability compensation was increased by 1.5%, beginning 1 January 2014. Although this was a great step to continue to improve Veteran benefits, these annual COLA bills consume a significant amount of Congress' time every year. Although not specified in this hearing, instead of having to return to the issue over and over again, AUSN applauds the mission of H.R. 4096, the American Heroes COLA Act of 2014, formerly H.R. 570, sponsored by Representative Jon Runyan (R-NJ-06), which would make the annual adjustments automatic based, on the Consumer Price Index (CPI) and increases in benefits under the Social Security Act. The rates of disability compensation for Veterans with service-connected disabilities and the rates of DIC for survivors of certain service-connected disabled Veterans would become an automatic increase, which would save Congress time by alleviating an annual issue that is usually passed with little to no opposition, and it protects Veteran benefits from being delayed by possible Congressional delays, which have become a very real issue in the past few years.

In lieu of a permanent solution, AUSN supports H.R. 4095, the Veterans' Cost-of-Living Adjustment (COLA) Act of 2014, introduced by Representative Jon Runyan (R-NJ-06) and Representative Dina Titus (D-NV-01), which would provide for an increase, effective 1 December 2014, in the rates of compensation for Veterans with service-connected disabilities and the rates of DIC for the survivors of certain disabled Veterans. This legislation continues to provide the quality of life guarantees made to our nation's servicemembers and their dependents.

H.R. 4102: A BILL TO AMEND TITLE 38, UNITED STATES CODE, TO CLARIFY THAT THE ESTATE OF A DECEASED VETERAN MAY RECEIVE CERTAIN ACCRUED BENEFITS UPON THE DEATH OF THE VETERAN

Current law states that only a Veteran's spouse or children under the age of eighteen are entitled to receive retroactive Department of Veterans Affairs (VA) disability benefits compensation in the event of a claimant's death. Unfortunately, history has shown that 2.6 percent of Veterans with pending VA disability benefits claims die while waiting on the completion of the claims process. One example of this concerning trend is the experience that Indianapolis Veteran, Sgt. 1st Class Shelton Hickerson, USA (Ret.) had. He initially filed a claim in 2000 but was denied benefits. Mr. Hickerson decided to appeal the decision. Eventually, after waiting more than 10 years for a decision regarding his appeal, Mr. Hickerson was awarded his claim for 100% disability; however, he died the same day his appeal was approved. Consequently, his daughter, Sharon, was not eligible to receive any compensation on behalf of her father due to the fact that she was over 18 and not otherwise dependent upon her father.

H.R. 4102, a bill introduced by Representative Jeff Miller (R-FL-01) and Representative Jackie Walorski (R-IN-02), would allow for a Veteran's estate to be awarded VA payments consistent with the general principles of estate law. In addition, the bill would correct the wrong done to the Hickerson family by directing the Secretary of Veterans Affairs to pay to the estate of Shelton Hickerson the sum of \$377,342 representing the amount that the Secretary awarded to Shelton Hickerson on the date of his death that was not payable to any survivor or his estate.

AUSN wholeheartedly supports H.R. 4102. It is imperative that Congress continue to improve upon the ways our Veterans are compensated for providing such a valuable service to the nation by ensuring this scenario which happened to the family of Sgt. 1st Class Shelton Hickerson never happens again. VA claims compensation should continue to be made on or after the date of the Veteran recipient's death, payable to their estate and rightful beneficiaries. This legislation is the least our nation can do to bring some comfort to the families of Veterans who are laid to rest before their VA claim is finalized.

H.R. 4141: A BILL TO AMEND TITLE 38 UNITED STATES CODE (USC) TO AUTHORIZE THE SECRETARY OF VETERANS AFFAIRS TO ENTER INTO ENHANCED USE LEASES FOR EXCESS PROPERTY OF THE NATIONAL CEMETERY ADMINISTRATION THAT IS UNSUITABLE FOR BURIAL PURPOSES

Currently, governing Enhanced Use Leases (EULs), long a method for the VA to make productive use of underutilized property, was changed in 2012 to make homeless Veterans and Veterans at risk of homelessness the sole beneficiaries of the program. Beginning in 1991, Congress gave the VA the authority to enter into EULs with outside developers to improve, maintain and make use of VA property for a period of time. The arrangement was made possible as part of the Veterans Benefits Programs Improvement Act (P.L. 102-86). Until 2012, the VA was able to enter into any lease that furthered the mission of the VA and enhanced the use of the property or that would result in the improvement of medical care and services to Veterans in the geographic area. The maximum lease term was 75 years, and the VA was to charge "fair consideration" for the lease, including in-kind payment. While EULs involved non-housing purposes (e.g., child care centers, golf courses and parking facilities), a number of the EULs awarded prior to 2012 involved housing for homeless Veterans. In 2012, as part of the Honoring Americas Veterans and Caring for Camp Lejeune Families Act (P.L. 112-154), Congress limited the circumstances under which the VA may enter into EULs to "the provision of supportive housing." Supportive housing is defined as housing combined with supportive services for Veterans or their families who are homeless or at risk of homelessness. Among the types of housing that qualify are transitional, permanent and single room occupancy housing, congregate living, independent living or assisted living facilities. Leases that were entered into prior to 1 January 2012, will be subject to the law as it previously existed. While the VA does not have to receive consideration for an EUL under the amended law, if it does receive consideration, it may only be "cash at fair value" and not in-kind payment. Each year, the VA is to release a report about the consideration received for EULs.

H.R. 4141, introduced by Representative Ander Crenshaw (R-FL-04), would enable the use of excess property of the National Cemetery Administration, deemed unsuitable for burials, for the use of building memorials that support the mission of the VA. It authorizes organizations to request the use of land on National Cemeteries to include the creation of memorials and pavilions paid for by private funds.

AUSN recognizes and appreciates the intent of H.R. 4141, legislation that will honor our fallen and past Veterans and provide space for their loved ones to gather

and reflect. It is important to remember our Veterans, as our nation moves past over a decade of war, and provide their families with opportunities within organizations to build memorials that show respect for the honor, courage and commitment of their loved ones. Additionally, the ability of organizations to build memorials would enhance the education of generations to come on sacrifices made by their forefathers in service to our nation.

However, it is unclear to AUSN regarding the criteria the National Cemetery Administration uses to define 'unsuitable for burials,' and we question if it is 'unsuitable' for burials, how such land might be suitable for other purposes. Additionally, AUSN is unclear at this time whether the bill would impact current EUL language regarding combating homeless Veterans and the costs to the VA for allowing outside organizations to enter into lease agreements on land overseen by the National Cemetery Administration.

H.R. 4191: THE QUICKER BENEFITS DELIVERY ACT

The Department of Veterans Affairs (VA) receives about 1.25 million claims for Veterans disability benefits per year. As identified by the VA, for a Veteran to qualify within the claims backlog, they must be waiting 125 days or more for the VA to process their claim. As of the most recent 2014 quarterly report of the Veterans Benefits Administration (VBA), there are over 636,000 claims pending and over 384,000 in backlog. (<http://www.vba.va.gov/REPORTS/mmwr/#characteristics>). For example, according to the Center for Investigative Reporting, the average wait time for Veteran filing a claim for the first time in a St. Paul, Minnesota regional office is 180 days! Although the VA has stated that it hopes to end the claims backlog by 2015, the complexity of claims, the high volume of submissions and the oftentimes inaccurate, incomplete or insufficient medical records or evidence that the VA has to determine is valid and sufficient for a Fully Developed Claim (FDC) results in delays and adds to the backlog. Veterans file an FDC for an injury, disability or condition believed to have occurred or been aggravated by military service or a condition caused or aggravated by an existing service-related condition. The VA, however, oftentimes requires that the Veteran go into a VA hospital to get evaluated in order to submit a disability claim, for an FDC for example, whereby the Veteran will oftentimes experience long wait times, delaying the final claims process even further.

H.R. 4191, the Quicker Benefits Delivery Act, builds off of last year's bill, H.R. 1980, both introduced by Representative Tim Walz (D-MN-01), which would amend Title 38, United States Code (USC), to improve the treatment of medical evidence provided by non-Department of Veterans Affairs (VA) medical professionals in support of claims for disability compensation under the laws administered by the Secretary of Veterans Affairs. The bill, in the form of H.R. 4191, would enable those who have medical evidence of their ailment from a non-VA medical professional that is deemed 'sufficiently complete' to have their claims reviewed by the VA regarding their full disability compensation under the Acceptable Clinical Evidence initiative. In the bill, the VA is also directed to accept private medical evidence for the completion of disability claim, whereby such evidence shall be used for a 'sufficiently complete' claim that is competent, credible, probative and containing such information as may be required to make a decision on the claim. Finally, the bill requires a report by the VA on the progress of the Acceptable Clinical Evidence initiative and the number of claims eligible for the initiative by each fiscal year, further improving Congressional oversight of the VA.

AUSN supports H.R. 4191, since it seeks to help end the backlog of claims by conserving VA resources and enabling quicker, more accurate decisions for Veterans by allowing private medical evidence documentation that is competent, credible, probative and otherwise adequate for rating purposes to be used when supporting a claim. This legislation removes bureaucratic red tape by allowing Veterans to see local doctors for their initial diagnosis and avoid long wait times at VA hospitals.

AUSN continues its efforts to support legislation that seeks to help end the claims backlog by streamlining efforts within the VA. It is important that every reasonable action by the VA and Congress be taken to ensure that Veterans receive the benefits they have earned through their sacrifices in a timely and effective manner. AUSN continues to make this a top priority, and we will continue to push, pressure, publicize and prioritize the disability claims backlog issue until there is a successful conclusion to ending the VA claims backlog.

CONCLUSION

We firmly believe that many of these bills will benefit our nation's Veterans and honor their commitment and service to this country. In addition, we look forward to hearing of their future success and consideration during this session of Congress and we are available to help answer any and all questions. AUSN stands ready to be the Voice for America's Sailors, abroad and upon their return home, and looks forward to working with Congress and the VA on serving our Veterans.

Thank you.

AUSN EXECUTIVE SUMMARY OF WRITTEN TESTIMONY

The following are AUSN's positions on the bills H.R. 2018, H.R. 2088, H.R. 2119, H.R. 2529, H.R. 3971, H.R. 3876, H.R. 4095, H.R. 4102, H.R. 4141, and H.R. 4191;

AUSN supports H.R. 2018, the Honor Those Who Served Act, which seeks to help streamline applications for headstones or markers, especially for those who served in many past conflicts that helped shape our nation, so they may be properly honored for their service who are currently not recognized just because of deterioration of graves or the inability to determine Next-of-Kin (NOK).

AUSN recognizes and appreciates H.R. 2088's intent to establish this pilot program in order to utilize the highest performing offices to adjudicate the most difficult medical conditions, however, AUSN believes that this pilot program should not distract from the overall goal of eliminating the claims backlog or marginalize existing Regional Offices (RO's).

AUSN supports H.R. 2119, Veterans Access to Speedy Review Act, providing options to Veterans to ease the process of appealing a claim, making available additional means a Veteran can appear before a Board of Appeals.

AUSN, at this time, does not take a position on H.R. 2529 due to insufficient feedback from our own membership.

AUSN supports H.R. 3671, which eliminates the 1 November 1990 date of eligibility and expands the qualifications for affixing a Veteran status medallion to an existing Veteran headstone or marker.

AUSN recognizes and appreciates the intent of H.R. 3876, Burial With Dignity for Heroes Act, however remains uncertain as to the impact the legislation would have upon the VA and its resources, especially in the determination and availability of grant money to fund the program.

AUSN supports H.R. 4095, the Veterans' Cost-of-Living Adjustment (COLA) Act of 2014, which would provide for an increase, effective 1 December 2014, in the rates of compensation for Veterans with service-connected disabilities and the rates of dependency and indemnity compensation (DIC) for the survivors of certain disabled Veterans.

AUSN wholeheartedly supports H.R. 4102. It is imperative that Congress continues to improve upon the ways our Veterans are compensated for providing such a valuable service to the nation by ensuring this scenario which happened to the family of Sgt. 1st Class Shelton Hickerson never happens again.

AUSN recognizes and appreciates the intent of H.R. 4141, legislation that will honor our fallen and past Veterans and provide space for their loved ones to gather and reflect, however, it is unclear to AUSN regarding the criteria the National Cemetery Administration uses to define 'unsuitable for burials' and, how might such land be suitable for other purposes, as well as if the bill would impact current Enhanced Use Leases (EUL) language regarding combating homeless Veterans and what costs, if any, would be incurred on the VA for allowing organizations to enter into lease agreements.

AUSN supports H.R. 4191, Quicker Benefits Delivery Act, as it seeks to help end the backlog of claims by conserving VA resources and enabling quicker, more accurate decisions for Veterans by allowing private medical evidence documentation that is competent, credible, probative, and otherwise adequate for rating purposes, to be used when supporting a claim.

PREPARED STATEMENT OF RAYMOND C. KELLEY, DIRECTOR, ON H.R. 2018, H.R. 2088, H.R. 2119, H.R. 2529, H.R. 3671, H.R. 3876, H.R. 4095, H.R. 4102, H.R. 4141, AND H.R. 4191

Mr. Chairman and Members of the Subcommittee:

On behalf of the men and women of the Veterans of Foreign Wars of the United States (VFW) and our Auxiliaries, I would like to thank you for the opportunity to testify on today's pending legislation.

The VFW supports H.R. 2018, with recommendations:

The VFW supports revising 38 CFR 38.632 to allow agencies outside a veteran's or descendant's next-of-kin (NOK) to request a headstone or grave marker from the Department of Veterans Affairs (VA) to commemorate an eligible veteran. The VFW encourages the Committee to ensure federal policy properly balances the desires of the veteran's family and those who seek to appropriately memorialize those who served, with the religious beliefs of the veteran.

On July 1, 2009, the VA redefined who may apply for a government-furnished headstone or marker for an eligible veteran or family member. The VA's newest definition limits eligibility to apply for a headstone or marker to the NOK or a descendant of the NOK. The VFW appreciates the intent behind the regulation, which ensures that family members are included in the decision-making process for memorializing loved ones. However, the VFW also believes that deceased veterans deserve marked and well-maintained grave sites in the absence of NOK or descendants. To balance these two notions, the VFW recommends the Committee make two changes to the bill's language:

First, the VFW suggests language should be included that affords the descendants of veterans who served during WWI or in previous wars the right to have a headstone or marker removed or replaced if it was not requested by NOK. As written, the legislation provides that "any person" may request a headstone or marker for a veteran who served on active duty 62 years prior to the request date for a marker. This language would permit an historian to request a headstone for a veteran who dies in 2014, but who served in Korea 63 years ago, without the consent of the veteran's family. The VFW believes it is safe to presume that those who served during WWII and after still have living children or grandchildren who should be consulted before a marker is ordered. However, an outside agent should be permitted to request a headstone or marker for any veteran if the applicant can prove the veteran has no direct living descendants.

Second, the VFW urges the committee to ensure the legislation does not imply that an "emblem of belief" is required to be included on a headstone or marker. Currently, the legislation reads that "in the case of a request for a headstone or marker under this section for a decedent for whom insufficient information exists regarding the religious beliefs of the individual ... the person requesting the headstone or marker may request a headstone or marker without an emblem of belief" (EOB). The VFW believes that any outside agency must prove that the veteran desired an EOB on his or her headstone or marker before a request for an EOB is granted, unless otherwise approved by a descendant of the veteran. This change will ensure the religious freedoms of the veteran are honored.

The VFW supports the intent of H.R. 2088, but has concerns:

The VFW appreciates the idea to boost support for the best performing regional offices in order to focus additional attention on the most complex and time-consuming medical conditions, which is intended to reduce processing times and error rates of disability claims. However, the VFW is concerned that the pilot may have unintended consequences, mainly the adverse effect it could have on Veterans Service Organization's (VSO) representation activities.

The Veterans Benefits Administration (VBA) now has the technological tools to assess the capacity of offices to handle more work and move work to those locations. The VBA is already increasingly transferring cases from offices with high workloads to those more capable of processing the work more quickly—as would occur under this legislation. It makes sense that as the VA "brokers" more claims or parts of claims, they identify specific regional offices to adjudicate complicated medical conditions, as this legislation seeks to achieve.

However, we know that shifting claims away from the veterans' geographic area has unintended consequences. Brokering can interfere with VSO representational activity, which benefits from the close proximity between service officers and VA personnel. Such proximity allows for problems to be fixed quickly and informally, helping veterans avoid unnecessary appeals and receive benefits quicker. Currently, service officers have no ability to identify which cases have been brokered or the status of those cases unless they search cases one by one. We urge Congress to develop policies which mitigate the negative effects of brokering.

Before this or a similar pilot moves forward, VA must devise adequate workload management tools for VSOs. VSOs need to receive electronic notification of work performed on claims, and unfettered access to electronic claim files, and access to the VA personnel handling the brokered work. It is critical that the pilot does not leave VSO service officers behind.

The VFW supports H.R. 2119, with recommendations:

The VFW believes that video conferencing (VTC) should be the default method for hearings before the Board of Veterans' Appeals. Although conducting hearings

through VTC will expedite the adjudication of claims and eliminate substantial travel costs to the veteran and VA, we feel strongly that veterans should have the opportunity to elect to attend the hearing in person. We recommend the committee amend the bill to indicate that the VA must notify the veteran of his or her right to an in-person hearing and “shall” grant such a request.

The VFW supports H.R. 2529, with a recommendation:

The bill amends Title 38 to ensure all veterans have equal access to VA benefits. We recommend that the Committee amend section 103(c) of such title by striking “according to” and all that follows to the period at the end and inserting “in accordance with section 101(31)” of this amendment title; otherwise, the rest of the legislation is moot. With this amendment, the VFW supports the bill.

The VFW supports H.R. 3671:

Currently, VA may furnish a medallion on a headstone or marker for graves that are marked with a private headstone or marker for veterans who died on or after November 1, 1990. This bill rightfully expands this honor to all veterans regardless of their date of death. The VFW fully supports the legislation.

The VFW opposes H.R. 3876:

The VFW believes that all veterans should be buried in an honorable manner that is reflective of the individual’s sacrifice, regardless of their financial situation. The VFW has provided over a thousand qualified homeless veterans with honorable burials in VA or state cemeteries free of charge, with assistance from Dignity Memorial’s Homeless Veterans Burial Program.

The VFW appreciates the intent of H.R. 3876, which seeks to ensure homeless veterans are buried with honor by establishing a grant program within the VA for burial of homeless veterans. This bill would allow private companies to be reimbursed for all interment costs of eligible homeless veterans, including the preparation of the body, transportation, clothing, casket and coordination of the funeral service. The VFW believes this to be unnecessary, and would cause a disparity in benefits between veterans with no next of kin and those with families.

Thanks to the work of this committee, VA coordinates interment with local medical examiners and agencies, to ensure that eligible veterans with no next-of-kin are laid properly to rest in one of VA’s 131 national cemeteries. The VA will partially reimburse families or funeral homes for burial and funeral costs of any eligible veteran. In cases where there is no next-of-kin, the VA provides a casket, urn, or another acceptable burial container. In addition, eligible veterans receive a gravesite at any national cemetery with available space, opening and closing of the grave, perpetual care, a headstone or marker, a burial flag, and a Presidential Memorial Certificate, at no cost. The VFW does not believe the VA should grant additional memorial benefits to a veteran based on the individual’s personal circumstances.

The VFW believes that the current memorial benefits are sufficient to ensure a dignified burial for any veteran, including homeless veterans, with one exception. As of January 10, 2014, the VA can no longer pay the cost of transporting the remains of certain deceased veterans to State, Tribal, or private cemeteries. The VFW believes the Committee should expand VA’s current authority to pay for the cost of transporting the remains of certain deceased veterans to the closest National cemetery for burial to include transportation for burials in a State or Tribal cemetery, and a private cemetery when appropriate.

The VFW strongly supports H.R. 4095:

Disabled veterans, as well as their surviving spouses and children, depend on their disability and dependency and indemnity compensation to bridge the gap of lost earnings and savings that their disability has caused. Each year, veterans wait anxiously to find out if they will receive a cost-of-living adjustment (COLA). There is no automatic trigger that increases these forms of compensation for veterans and their dependents. Annually, veterans wait for Congress to provide the same adjustment that is automatic to Social Security and other Federal beneficiaries.

The VFW supports this legislation that will bring parity to VA disability and survivor recipients’ compensation by providing a COLA beginning December 1, 2014, so long as VA disability, pension, and survivor benefits continue to be calculated with the currently used Consumer Price Index–W and not be adjusted to the Chained Consumer Price Index.

The VFW strongly supports H.R. 4102:

H.R. 4102 will allow payments issued on the date of the veteran’s death to be awarded to the veteran’s estate, consistent with general principles of estate law.

Sometimes, disability claims are not approved by VA until after the claimant dies. In 2013, the VA paid \$437 million in retroactive benefits to survivors of nearly 19,500 veterans who died while waiting for benefits. This represents a dramatic increase from 2000, when the widows, parents, and children of fewer than 6,400 veterans were paid \$7.9 million for claims filed before their loved one’s death. Long

wait times are contributing to tens of thousands of veterans being approved for disability benefits only after they are dead.

To make matters worse, under current law, only a veteran's spouse, children under the age of 18, and parents are eligible to receive retroactive VA disability benefits compensation in the event of a veteran claimant's death. This means veterans who have fought VA until their death, over benefits they earned with their service, are unable to pass their benefits to their adult children. In many cases, the adult children act as the veteran's caregiver, and should be entitled to the veteran's disability benefit if the veteran dies before ever receiving compensation from VA.

The VFW supports the intent of H.R. 4141:

Beginning in 1991, Congress authorized VA to enter into Enhanced-Use Leases (EUL) to better serve our Nation's veterans. Through EUL cooperative arrangements with other public and private entities, VA transformed empty and underutilized property into constructive projects that contribute to VA's mission. However, when Congress extended VA's EUL authority in 2012, Congress limited VA's leasing authority to only building supportive housing.

The limited EUL authority impedes VA's capacity to enter into a wide variety of contracts that would benefit veterans, including the ability of organizations to build veterans memorials on National Cemetery Administration (NCA) property. While the VFW agrees that NCA should have the ability to enter in EULs for the purposes of constructing memorials, as this legislation would do, the VFW believes that Congress should give the entire Department the authority to enter into innovative public or private agreements.

The VFW strongly supports H.R. 4191:

Consistent with the Independent Budget co-authored by the VFW, we believe Congress should immediately "pass legislation to require that private medical evidence be given due deference when it is competent, credible, probative, and otherwise adequate for rating purposes."

Undersecretary Hickey has taken significant action in recent years to ensure VA Regional Offices break down bureaucratic hurdles that veterans face when applying for benefits, including maximizing the use of private medical evidence. The VBA eliminated work credit for VA Rating Specialists who request superfluous compensation medical exams. For this reason, VA may claim the legislation is "unnecessary and duplicative." However, we have found that some employees still resist giving private medical evidence the same weight as VA medical evidence.

To further support efforts to encourage the use of private medical evidence, Congress should amend title 38, section 5103A(d)(1) to provide that, when a claimant provides private medical evidence adequate for rating purposes, the Secretary shall not request a VA medical examination. This will encourage the VBA to make greater use of private medical evidence when making claims decisions, which would help eliminate the months that veterans spend waiting for medical examinations; and also save the VHA the cost of unnecessary examinations, and reducing appointment wait times, making this a win-win for both VA and veterans.

Mr. Chairman, this concludes my testimony, and I look forward to answering any questions you and the subcommittee may have.

Information Required by Rule XI2(g)(4) of the House of Representatives

Pursuant to Rule XI2(g)(4) of the House of Representatives, VFW has not received any federal grants in Fiscal Year 2013, nor has it received any federal grants in the two previous Fiscal Years.

PREPARED STATEMENT OF THOMAS MURPHY, AND PATRICIA LYNCH WATTS

Mr. Chairman and Members of the Subcommittee, thank you for inviting us here today to present our views on several bills that would affect Department of Veterans Affairs (VA) benefits programs and services. Accompanying me today are Ms. Patricia Lynch Watts, Director, Legislative and Regulatory Service, and Mr. David Barrans, Deputy Assistant General Counsel.

At this time, cost estimates are not available for the following bills: H.R. 2088, H.R. 2529, H.R. 3671, H.R. 4102, H.R. 4141, and H.R. 4191.

H.R. 2018

Section 2(a) of H.R. 2018, the "Honor Those Who Served Act of 2013," would amend section 2306 of Title 38, United States Code (U.S.C.), to specify the persons who are eligible to request a headstone or marker to commemorate an eligible decedent. More specifically, the bill would make the following individuals eligible to request a headstone or marker: (1) The decedent's next-of-kin (NOK); (2) a person au-

thorized in writing by the NOK; (3) a personal representative authorized in writing by the decedent; (4) when there is no known NOK or authorized representative, specified persons and entities familiar with the research sources and methods necessary to prove the identity of the decedent; or (5) in the case of a Veteran who served on active duty in the Armed Forces at least 62 years prior to the date on which the headstone or marker is requested, any person. Section 2(a) of the bill would also specify that, under certain circumstances, a person requesting a headstone or marker may request that the headstone or marker be furnished without an emblem of belief. The amendments made by the bill would apply with respect to a request for a headstone or marker submitted after the date of enactment of the bill.

VA does not support H.R. 2018 because we believe the issue would be better addressed through the regulatory process. We interpret Congressional intent to be to ensure that there are no unmarked graves of Veterans. We share that goal and seek to ensure public input into the revised definition that is achievable through the issuance of a proposed rule.

VA is in the process of substantially rewriting the regulations governing the benefits administered by NCA, including the regulation governing applications for headstones and markers. The current headstone and marker application process is governed by section 38.632, title 38, Code of Federal Regulations (C.F.R.), which defines an “applicant” to mean the decedent’s NOK, a person authorized in writing by the NOK, or a personal representative authorized in writing by the decedent to apply for a headstone or marker. In this way, section 2(a) of the bill would codify the definition of “applicant” at 38 C.F.R. § 38.632(b)(1) but add two new classes of persons and entities eligible to apply for headstones and markers. VA promulgated the existing definition of an applicant to ensure that family members are not left out of the decision-making process for memorializing loved ones, a very personal matter. However, VA understands the concerns with the current regulatory definition of applicant, is in the process of drafting a proposed rule to amend the definition of applicant to address those concerns, and will solicit and consider comments from the public in connection with publication of that proposed rule.

VA’s pending regulatory process seeks to provide an effective means of addressing these concerns with the benefit of input from all affected and interested parties and will ensure that VA is able to adapt these policies as needed to address identified issues. We are concerned that certain aspects of the bill may give rise to operational concerns that could be avoided through rulemaking. For example, some of the bill’s terms—such as the references to “a local historian, or a genealogist or other person familiar with the research sources and methods necessary to prove the identity of the decedent”—are vague and may lead to difficulties implementing this legislation. Further, paragraph (h)(5) of 38 U.S.C. § 2306, as would be added by this bill, would allow “any person” to request a headstone or marker for a Veteran who served 62 years prior to the date of the request, even if the Veteran died only recently and there is an NOK. This could lead to an increased number of competing or conflicting requests concerning the same Veteran. VA also has a technical concern with the bill language. Section 2(a) would add at the end of current section 2306 new subsections (h) and (i). However, section 2306 currently ends with a subsection (h), which specifically lists certain prohibitions on the provision of headstones and markers.

VA does not have sufficient data to estimate the costs of this bill.

H.R. 2088

Section 1(a) of H.R. 2088 would require the Secretary of Veterans Affairs to carry out a 3-year pilot program under which the Secretary would establish in the Department of Veterans Affairs 12 “claims adjudication centers of excellence” (COE). Section 1(b) of the bill would direct the Secretary to select as the locations of the COEs the three highest performing regional offices in each of the four areas of VBA. The bill would also direct the Secretary to evaluate performance based upon the quality and accuracy of ratings of each of the regional offices and the average number of days a claim submitted to each of the regional offices is pending.

Section 1(c) of the bill would require each of the selected COEs to focus on adjudicating claims relating to one medical condition selected by the Secretary of Veterans Affairs; such conditions would be selected based on being “among the most complex and time consuming” for adjudication purposes. Section 1(d) would require each employee of a COE to receive specific training related to the selected medical condition for his or her COE and focus on that condition to the extent practicable. Section 1(d)(3) would authorize the Secretary to assign additional full-time employees to a COE and allow the director of the regional office from which the employee came to hire an additional full-time employee at the regional office. Section 1(e) of the bill

would require the Secretary to select the medical conditions not later than 90 days after the date of enactment of the Act.

Although VA recognizes value in creating COEs, VA does not support this bill. For COEs to be successful, every aspect of claims processing must occur electronically. While disability compensation claims are processed electronically in the Veterans Benefits Management System (VBMS), functionality to support workload management at the detailed level that would be required to create COEs as specified in the bill is not scheduled to be released until fiscal year (FY) 2015. In addition, VA is concerned about selecting COEs based only on rating accuracy and the average number of days claims have been pending at a point in time. These measures vary by reporting period and do not reflect several other factors that would need to be considered in defining the “highest performing regional offices” in each area.

Further, VA is currently in the process of implementing various initiatives focused on improving claims processing accuracy and efficiency. VBA is developing the National Work Queue (NWQ), a paperless workload management initiative designed to improve VBA’s overall production capacity and assist with reaching the Secretary’s goals of completing all claims in 125 days at a 98-percent accuracy level in 2015. The NWQ is being implemented in a three-phased approach. The initial Transition Phase is currently underway and builds upon the success of the workload management strategy employed under VBA’s Oldest Claims Initiative. Starting in FY 2015, as workload management functionality is deployed in VBMS, VBA will begin the second phase, to centrally manage and distribute the claims inventory from the national level. In this phase, VBA will still distribute work to regional offices at the claim level rather than at the issue level. In the final phase, following further VBMS development, individual issues will be routed, nationally, to individual employees, based on the nature of the claim and the skill set of the particular claims processor.

VBA has also reorganized its workforce into cross-functional teams that work together on one of three segmented lanes: express, special operations, and core. These lanes are based on the complexity and priority of claims. Employees are assigned to lanes based on their experience and skill levels. Each regional office has a Special Operations Lane that applies intense focus and case management on specific categories of claims, such as claims from Veterans who are homeless, terminally ill, former Prisoners of War, or seriously injured. Employees in the Special Operations Lane receive specialized training on these types of claims.

VBA continues to invest in numerous people, process, and technology initiatives to eliminate the claims backlog and plans to revisit the concept of a COE pilot in FY 2016. However, creating COEs before this timeframe would force VBA to redirect vital resources and hinder our ability to achieve its FY 2015 timeliness and quality goals.

Costs related to this bill are not available at this time.

H.R. 2119

Section 2(1) of H.R. 2119, the “Veterans Access to Speedy Review Act,” would amend section 7107 of title 38, U.S.C., to allow the Board of Veterans’ Appeals (Board) to determine, for purposes of scheduling a hearing for the earliest possible date, whether the hearing will be held at the Board’s principal location or at an appropriate Federal facility located within the area served by a regional office of the Department, and also whether to provide a hearing through the use of video conferencing. Section 2(1) would also permit the appellant to request a different location or type of hearing upon notification of the Board’s determination and give the Board discretion to grant such a request. Section 2(2) of the bill would remove the provision in paragraph (e)(2) of section 7107 that states that, if an appellant declines to participate in a hearing through use of electronic means, the opportunity for a hearing before the Board at its principal location or at an appropriate Federal facility located within the area served by a regional office of the Department will not be affected.

VA fully supports H.R. 2119, as this legislation would potentially decrease hearing wait times for Veterans, enhance efficiency within VA, and better focus Board resources toward issuing decisions. The Board has historically been able to schedule video conference hearings, more quickly than in-person hearings, saving valuable time in the appeals process. In FY 2013, on average, video conference hearings were held 110 days sooner than in-person hearings. H.R. 2119 would allow both the Board and Veterans to benefit from these time savings by giving the Board greater flexibility to schedule video conference hearings than is possible under the current statutory scheme.

Enactment of H.R. 2119 could also lead to increased productivity at the Board. Time lost due to travel and time lost in the field due to appellants failing to appear for their hearing would be greatly reduced, allowing Veterans Law Judges (VLJs) to better focus their time and resources on issuing decisions. The time saved for VLJs could translate into faster issuance of Board decisions for Veterans. Historical data also shows that there is no statistical difference in the ultimate disposition of appeals based on the type of hearing held. Veterans who had video conference hearings had an allowance rate for their appeals that was virtually the same as Veterans who had in-person hearings. H.R. 2119 would, however, still afford Veterans who want an in-person hearing the opportunity to specifically request one.

Finally, major technological upgrades to the Board's video conference hearing equipment over the past several years makes the Board well-positioned for the enactment of H.R. 2119. This includes the purchase of high-definition video equipment and state-of-the-art digital audio recording system, implementation of a virtual hearing docket, and significantly increased video conference hearing capacity. Enactment of H.R. 2119 would allow the Board to better leverage these important technological enhancements.

VA estimates that this bill would result in a reduction in travel expenses over time. However, without knowing the number of remote hearings or the reduction in travel Board hearings that would be provided under the enhanced authority in this bill, VA cannot provide specific cost estimates.

H.R. 2529

H.R. 2529, the "Veteran Spouses Equal Treatment Act," would amend section 101 of title 38, U.S.C., to amend the definitions of "surviving spouse" and "spouse" for purposes of title 38. Specifically, the bill would remove from the definition of "surviving spouse" the phrase "of the opposite sex," and amend the definition of "spouse" to provide that "an individual shall be considered a 'spouse' if the marriage of the individual is valid in the State in which the marriage was entered into or, in the case of a marriage entered into outside any State, if the marriage is valid in the place in which the marriage was entered into and the marriage could have been entered into in a State." The bill would define "State" the same as that term is defined in section 101(20) of title 38, U.S.C., for purposes of title 38, but include also "the Commonwealth of the Northern Mariana Islands."

VA generally supports the passage of this bill, but has some concerns with the bill's language. Current section 101(3) and (31) of title 38, U.S.C., limit the definitions of "surviving spouse" and "spouse" for purposes of title 38 to only a person of the opposite sex of the Veteran. The language in these provisions is substantively identical to the language in section 3 of the Defense of Marriage Act (DOMA), 1 U.S.C. § 7, which the Supreme Court, in *United States v. Windsor*, 133 S. Ct. 2675 (2013), declared to be unconstitutional because it discriminates against legally-married, same-sex couples. On September 4, 2013, the United States Attorney General informed Congress that the President had directed the Executive Branch to cease enforcement of sections 101(3) and (31) of title 38 to the extent that those provisions preclude the recognition of legally-valid marriages of same-sex couples. Pursuant to the President's direction, VA is no longer enforcing the title 38 provisions to the extent that they require a "spouse" or a "surviving spouse" to be a person of the opposite sex. Therefore, VA supports this bill as a means to amend the law to be consistent with the Supreme Court's decision and the President's directive. In particular, VA supports the removal of the requirement that a "spouse" or a "surviving spouse" be a person of the opposite sex from paragraphs (3) and (31) of section 101.

VA supports the general intent of section 2(2) of the bill to revise the criteria for determining the validity of a marriage. However, to further the goals of this bill and to avoid ambiguity regarding the applicable standard, we recommend that the bill also address section 103(c) of title 38, U.S.C., which provides that, in determining whether or not a person was a spouse of a Veteran, "marriage shall be proven as valid for the purposes of all laws administered by the Secretary according to the law of the place where the parties resided at the time of the marriage or the law of the place where the parties resided when the right to benefits accrued." Section 103(c) is specific to title 38 and is different than the standard used by nearly all other Federal agencies, including the Department of Defense. Further, while VA supports the bill's intent to change to the current marriage-validity criteria, VA is concerned that the marriage-validity criteria in section 2(2) of the bill may be overly restrictive. For example, VA notes that the bill is silent as to the applicability of tribal law to marriage validity. Under section 103(c), tribal law would be considered as "the law of the place where the parties resided." However, under H.R. 2529, VA would only consider the law of the "State" in determining if a marriage is valid for the purpose of Veterans' benefits. This could lead to the exclusion of some couples with valid

marriages under tribal law. VA welcomes the opportunity to work with the Committee on this bill.

Costs related to this bill are not available at this time.

H.R. 3671

H.R. 3671 would amend section 2306 of title 38, U.S.C., to extend eligibility for a medallion furnished by VA in order to signify the deceased's status as a Veteran regardless of date of death. Public Law 110-157 gave VA authority to "furnish, upon request, a medallion or other device of a design determined by the Secretary to signify the deceased's status as a veteran, to be attached to a headstone or marker furnished at private expense," for eligible Veterans who died on or after November 1, 1990. H.R. 3671 would remove the date of death limitation by codifying in statute that eligibility exists regardless of date of death.

VA strongly supports the concept to expand eligibility for the medallion benefit, however, VA requests the Committee amend versus remove the current eligibility date of November 1, 1990. VA would greatly support an amendment to provide eligibility for individuals who served "on active duty on or after April 6, 1917." Since VA began providing the medallion benefit in 2009, the vast majority (91 percent) of those claims were denied because the otherwise eligible Veteran died between 1960 and 1990. Additionally, there are more than 4.5 million deceased Veterans with service prior to April 6, 1917, which is the date the United States formally entered World War I. These Veterans could become eligible for the medallion benefit which could significantly impact the landscape of historic cemeteries and the historic headstones marking the graves of those who served prior to this date as well as impact the ability of NCA and other entities to comply with historic preservation and Federal stewardship statutes and regulations.

Costs related to this bill are not available at this time.

H.R. 3876

H.R. 3876, the "Burial with Dignity for Heroes Act of 2014," would amend Chapter 20 of Title 38, U.S.C., to add a new section 2067, which would direct the Secretary of Veterans Affairs to carry out a program to make grants to eligible entities to provide for the cost of burials for homeless Veterans who are eligible to be buried in a national cemetery and have no NOK, as determined by the Secretary. To be eligible to receive a grant under this provision, an entity would submit to the Secretary "an application containing such information and assurances as the Secretary determines appropriate."

VA does not support H.R. 3876 because the bill is unnecessary, and may be confusing, given existing statutory and regulatory authority. VA strongly supports the objective of ensuring that those who have earned the right to burial in a national, state, or tribal Veterans cemetery are accorded that honor. However, VA has long provided in regulation, at 38 C.F.R. § 3.1603, for a burial and plot or interment allowance for unclaimed remains of deceased Veterans. Further, Public Law 112-260, the "Dignified Burial and Other Veterans' Benefits Improvement Act of 2012," specifically provided the Secretary authority to furnish a casket or urn for a deceased Veteran when the Secretary is unable to identify the Veteran's NOK and determines that sufficient resources for the furnishing of a casket or urn for the burial of the Veteran in a national cemetery are not otherwise available. It is unclear from the language of H.R. 3876 the precise intent of the grant program and what benefits would be provided that are not currently provided by VA.

VA cannot estimate costs at this time given the uncertainty regarding the specific intent of the grant program with respect to what benefits would be provided for burial of the unclaimed remains of Veterans. In addition, without an understanding of the intended scope of the program, VA cannot estimate the resources and costs potentially involved in administration of the grant program.

H.R. 4095

H.R. 4095, the "Veterans' Compensation Cost-of-Living Adjustment Act of 2014," would require the Secretary of Veterans Affairs to increase, effective December 1, 2014, the dollar amounts for payment of disability compensation, the clothing allowance, and dependency and indemnity compensation. This bill would increase these rates by the same percentage as the percentage by which Social Security benefits under title II of the Social Security Act are increased, effective December 1, 2013. Each dollar amount increased, if not a whole dollar amount, would be rounded to the next lower whole dollar amount. Finally, the bill would also require VA to publish the resulting increased rates in the Federal Register.

VA strongly supports this bill because it would express, in a tangible way, this Nation's gratitude for the sacrifices made by our service-disabled Veterans and their

surviving spouses and children and would ensure that the value of their well-deserved benefits will keep pace with increases in consumer prices.

VA notes it has included in its own legislative proposals for FY 2015 a 5-year extension of the round-down authority referred to above, which is carried forth for 1 year in H.R. 4095. We also note that prior bills authorizing cost-of-living adjustments to these benefits have consistently provided that the increase in VA benefits on December 1 would be an increase from the dollar amounts in effect on November 30 of the same year and correspond to the percent increase in Social Security benefits taking effect on December 1 of the same year. In contrast, this bill would provide that the increase in VA benefits on December 1, 2014, would be an increase from the dollar amounts in effect on November 30, 2013, and correspond to the increase in Social Security benefits that took effect on December 1, 2013. In view of the consistent past practice, we believe the references to “2013” in section (2)(a) and section 2(c)(1) of the bill may be inadvertent and should be changed to “2014”.

VA estimates that the rounding provision of the bill would result in cost-savings of \$30 million in 2015, \$189.6 million over 5 years, and \$414.5 million over 10 years. VA’s cost estimates assume that the references to 2013 in the bill were inadvertent and therefore, based on estimated FY 2015 average payments for the subject benefits.

H.R. 4102

Section 1(a) of the draft bill would add the estate of a deceased claimant to the priority-ordered list of eligible recipients of accrued benefits under 38 U.S.C. § 5121, as long as the estate would not escheat. The amendments made by this section would apply to deaths occurring on or after the date of enactment of the bill.

Section 1(c) of the draft bill would require the Secretary of Veterans Affairs to pay to the estate of Shelton Hickerson \$377,342, representing the benefit awarded to Mr. Hickerson on the date of his death.

VA does not support H.R. 4102. In 1943, Congress enacted Public Law 78–144 and established, in what would become section 5121, a process by which certain Survivors could receive some portion of a Veteran’s accrued benefits. Since 1943, Congress has generally limited the payment of accrued benefits to surviving spouses, dependent children, and persons who paid for the expenses of the Veteran’s last sickness and burial.

By adding estates to the line of succession, VA would be required, in effect, to pay Veterans benefits for the benefit of persons or organizations that were not dependents of the Veteran at the time of death, such as adult children, charities, and creditors. In addition, when there is an estate that would not escheat, VA would no longer be able to reimburse persons who incurred the Veteran’s last sickness and burial expenses because the estate would have priority over a person who incurred such expenses.

VA regrets that it was unable to pay Mr. Hickerson all of his benefits before his death. However, VA opposes section 1(c) of the draft bill requiring that it pay the estate of Mr. Hickerson accrued benefits because such payment would treat his case differently from other similarly situated Veterans.

VA also opposes the draft bill as it would potentially expand the eligibility to substitute under 38 U.S.C. § 5121A, “Substitution in case of death of claimant,” because “a living person who would be eligible to receive accrued benefits due to the claimant under section 5121(a)” may request to substitute for the deceased claimant in a pending claim or appeal. In this way, the executor of a Veteran’s estate could request to substitute for the Veteran to complete a claim or appeal pending at the time of the Veteran’s death.

Costs related to this bill are not available at this time.

H.R. 4141

H.R. 4141 would amend section 8162 of title 38, U.S.C., to expand the authority of the Secretary of Veterans Affairs to enter into enhanced-use leases. Presently, enhanced-use lease authority is limited to leases for the provision of supportive housing. The bill would allow the Secretary of Veterans Affairs to enter into enhanced-use leases “only if the lease is not inconsistent with and will not adversely affect the mission of the Department for—(A) the provision of supportive housing; or (B) other purposes, only in the case of excess property of the National Cemetery Administration that is unsuitable for burial purposes.” The expanded authority would apply to leases entered into after the date of enactment of the Act.

VA would welcome the opportunity to work with the Committee on this bill. VA’s understands that the goal of the bill is to allow memorial halls, pavilions, and memorials to be built to show respect for the honor, courage, and commitment of Veterans. We note that, if one aim of the bill is to facilitate the placement of memorials

or other enhancements to cemetery grounds paid for by private funds, NCA already has specific donation authority under current law to accomplish that end. Specifically, 38 U.S.C. § 2407, titled “[a]uthority to accept and maintain suitable memorials,” allows VA to accept donations “made in any manner, which are made for the purpose of beautifying national cemeteries, or are determined to be beneficial to such cemetery.” In addition, our national cemeteries are maintained as national shrines in honor of all who served our Nation. Thus, the construction of memorial halls, pavilions, and memorials under enhanced-use lease agreements, while feasible, needs to consider what would happen to the structures at the end of such leases.

Moreover, VA believes that the bill should allow for enhanced-use leases for “other purposes” on any and all underutilized and/or vacant VA-controlled properties. VA proposed such an authority in its FY 2015 budget, which would allow the Department to pursue enhanced-use leases for purposes beyond supportive housing, similar to the broader authority that existed prior to December 2011. To the extent the bill is not broadened to authorize enhanced-use leases for VA-controlled properties in addition to NCA property, VA has a concern regarding the phrase “unsuitable for burial purposes” in section 1(a) on page 2, line 18, of the bill. VA believes that this criterion for use of an enhanced-use lease would be easier to implement operationally if it read “not needed for burial purposes for the duration of the lease.”

Further, VA has a technical concern regarding the bill language establishing the criteria for entering into an enhanced-use lease. As noted above, section 1(a)(1) of the bill would provide that the Secretary of Veterans Affairs may enter into an enhanced-use lease “only if the lease is not inconsistent with and will not adversely affect the mission of the Department for—(A) the provision of supportive housing; or (B) other purposes, only in the case of property of the National Cemetery Administration that is unsuitable for burial purposes.” However, by leading into subparagraphs (A) and (B) with “for—,” the language suggests that the lease cannot conflict with the Department’s mission for the purposes listed in those subparagraphs. For example, read literally, this language might suggest that VA may enter into any enhanced-use lease that would not conflict with or adversely affect the mission of the Department for “the provision of supportive housing.” We do not believe that this is the intent of the bill. To the extent the intent of the bill is to allow for the use of enhanced-use leases for “the provision of supportive housing” or “other purposes, only in the case of excess property of [NCA] that is unsuitable for burial purposes,” but only if the lease is not “inconsistent with and will not adversely affect the mission of the Department,” the language of the bill should be revised.

Costs related to this bill are not available at this time.

H.R. 4191

Section 2 of H.R. 4191, the “Quicker Veterans Benefits Delivery Act,” would amend section 5125 of title 38, U.S.C., to require VA to accept a report of medical examination from a non-VA physician provided by a claimant in support of a claim for benefits if the report is sufficiently complete to be adequate for the purpose of adjudicating such claim. Section 2 of the bill would also define the phrase “sufficiently complete” to mean “competent, credible, probative, and containing such information as may be required to make a decision on the claim for which the report is provided.” These amendments would apply to medical evidence submitted after the date that is 90 days after the date of enactment of the Act.

Section 3 of the bill would require the Secretary of Veterans Affairs, not later than 180 days after the date of enactment of the Act, to submit a report to Congress regarding the “Acceptable Clinical Evidence (ACE) initiative” of VA “in reducing the necessity for in-person disability examinations and other efforts to comply with the provisions of section 5125 of title 38, U.S.C., as amended by section 2 of the Act. Finally, section 4 of the bill would require the Secretary to submit to Congress, on an annual basis, a report containing specific information from each regional office regarding Veteran claims involving private medical evidence.

VA does not support H.R. 4191. VA appreciates the general intent of the bill, which seeks to provide benefits to Veterans more expeditiously. However, as written, the legislation is unnecessary and would be problematic to implement. Section 2 of the bill would prohibit VA from requesting a medical examination when evidence submitted is adequate for rating purposes. Currently, section 5103A(d)(2) of title 38, U.S.C., provides that an examination or opinion is only required when the record does not contain sufficient medical evidence to make a decision. Furthermore, 38 U.S.C. § 5125 already explicitly states that private examinations may be sufficient, without conducting additional VA examinations, for adjudicating claims. Consistent with these statutory requirements and VA’s implementing regulation at 38 C.F.R. § 3.159(c)(4), VA requests medical examinations only if the record does not

contain sufficient medical evidence to decide the claim. Therefore, this section is unnecessary. VA is already allowed to adjudicate a claim without an examination if evidence is provided by the claimant that is adequate for rating purposes.

Regarding sections 3 and 4 of the bill, VA maintains data concerning the number of examinations in which ACE is used. However, VA does not track the number of claims eligible for ACE that required additional evidence obtained through a telephone interview or whether private medical evidence is sufficient or insufficient for rating purposes.

No costs are associated with section 2 of the bill as VA already has this authority in existing law. Costs related to sections 3 and 4 of this bill are not available at this time.

This concludes my statement, Mr. Chairman. Thank you for the opportunity to appear before you today. I would be happy to answer any questions you or the other Members of the Subcommittee may have.

STATEMENT FOR THE RECORD:

HON. STEVE DAINES, (MT-AT LARGE)

As a cosponsor of H.R. 2018, The Honor Those Who Served Act, I believe it is critical that Congress passes this legislation to ensure that our veterans are provided with the honor and respect they deserve. I thank Chairman Runyan and Ranking Member Titus for holding a hearing on this important legislation.

Last year, some very troubling stories came to my attention from my state of Montana. At the Yellowstone County Veteran's Cemetery in Laurel, Montana, four recently buried veterans did not have a grave marker. In each of these cases all of the proper proof of service was presented but they were denied. The VA explained that with the exception of state or national cemeteries, all requests for a headstone must be signed by the veteran or the veteran's next of kin.

I understand we want to fulfill the wishes of veterans and make sure their final resting place does not include any markings that the veteran would not want. But surely we should not have a policy so inflexible that it essentially prohibits well-meaning veterans groups and historians from honoring veterans who may be unaware of the rigid VA requirements.

Furthermore, veteran groups such as Missing in America and The Patriot Guard Riders stand ready to honor fallen veterans and have done so in the past. But because of the current VA policy, they can no longer provide a headstone to help honor the service and sacrifices of our veterans.

But perhaps most compelling, there are an estimated two hundred thousand homeless veterans, and the current VA policy is especially detrimental to those veterans who had no close family members to claim them when they passed. The Honor Those Who Served Act would be significant step forward in addressing this wrong and would help ensure that no veteran is left without an appropriate and respectful headstone honoring their commitment and service to our country.

While I sincerely appreciate the VA's efforts in resolving the situation with the four deceased Montana veterans, it does not change the fact that it took months for the VA to correct these injustices and that the core flaws of the VA policy remain in place. And although the VA says it is working to adjust its policy, Congress cannot presume that any pending VA revisions will either be sufficient or finalized in a timely manner.

For these reasons, I strongly support The Honor Those Who Served Act, and I will continue to do everything I can to enact this commonsense legislation.

STATEMENT FOR THE RECORD

PARALYZED VETERANS OF AMERICA

Chairman Runyan, Ranking Member Titus, and members of the Subcommittee, Paralyzed Veterans of America (PVA) would like to thank you for the opportunity to offer our views on pending legislation before the Subcommittee.

H.R. 2018, the "Honor Those Who Severed Act of 2013"

PVA supports H.R. 2018, the “Honor Those Who Served Act of 2013.” This legislation expands the list of persons who are eligible to request headstones or markers furnished by the Secretary of Veterans Affairs (VA) upon the death of a veteran.
H.R. 2088

PVA cautiously supports the intent of H.R. 2088, a bill to direct the Secretary to carry out a pilot program to establish claims adjudication centers of excellence. While we recognize that the concept of this proposal is meant to improve claims adjudication work across the Veterans Benefits Administration, we have concerns about the underlying details of the legislation and the potential unintended consequences that may occur.

In many ways, PVA sees this legislation as a double-edged sword. We see tremendous advantages in the opportunities veterans service organizations (VSO) could have in sharing our expertise and knowledge of certain illnesses helping to train VA staff. The in-depth experience of VSO service officers with regards to the details of specific illnesses and injuries and our experience in preparing claims for adjudication, for example with spinal cord injury or disorder (SCI/D) and related claims in the case of PVA members, may lead to greater accuracy on the part of less experienced VA staff.

However, PVA is very concerned about regionalizing certain types of claims as this has often not proven very efficient. In these cases, some VA Regional Offices (VARO) won't get exposed to complex claims under this system. In the long run, this erodes the knowledge base of the staff as a whole. It may also lead to a single point of failure if a VARO handling a specific illness is disrupted by a natural or man-made disaster such as Hurricane Katrina, the 9/11 attack or San Francisco earthquake.

H.R. 2119, the “Veterans Access to Speedy Review Act”

PVA supports H.R. 2119, the “Veterans Access to Speedy Review Act.” As long as there is the ability to request an in-person hearing that the Board would be required to honor, we believe this will benefit both the claimant and the Board. At veteran service organization forums held by the Board, there has been an ongoing emphasis on holding video conferences whenever possible to reduce time lost for no-shows. Additionally, the grant rate for video versus in-person hearings is the same. In fact, PVA has encouraged service officers to hold video conference hearings and the vast majority of PVA hearings are now held via video conference.

Our only concern with the legislation is Section 2 regarding the appellant requesting a different location which indicates “If so requested, the Board may [emphasis added] grant such request” This language may too broadly allow the Board to disallow the appellant's request. In the case of older veterans, they may feel uncomfortable with video conferencing, believing it is less valid. The Board should always defer to the veteran when determining the best course of action in the appeals process.

H.R. 2529, the “Veterans Spouses Equal Treatment Act”

PVA has no position on H.R. 2529, the “Veterans Spouses Equal Treatment Act.”

H.R. 3671

PVA supports H.R. 3671 to expand the eligibility for a medallion furnished by the Secretary to signify the veteran status of a deceased individual. By removing any limitation due to date of death of a veteran, all those who served will be eligible for the recognition they earned through their service.

H.R. 3876, the “Burial with Dignity for Heroes Act of 2014”

PVA supports H.R. 3876, the “Burial with Dignity for Heroes Act of 2014.” Every veteran deserves the respect and dignity of a proper burial. Our only concern is with the cost of the program. It is critical that additional appropriations are identified to provide this earned benefit for those who served to avoid reducing services for other equally deserving veterans.

H.R. 4095, the “Veterans’ Compensation Cost-of-Living Adjustment Act of 2014”

PVA fully supports H.R. 4095, the “Veterans’ Compensation Cost-of-Living Adjustment Act of 2014,” that would increase, effective as of December 1, 2014, the rates of compensation for veterans with service-connected disabilities and the rates of dependency and indemnity compensation (DIC) for the survivors of certain disabled veterans. This would include increases in wartime disability compensation, additional compensation for dependents, clothing allowance, and dependency and indemnity compensation for children.

However, consistent with our position in the past, PVA cannot support the rounding down of increases in compensation. While our economy continues to struggle, veterans’ personal finances have been affected by rising costs of essential necessities to live from day to day and maintain a certain standard of living. Many veterans

and their families depend on their compensation. While this may be a small amount, any reduction can have a critical impact, especially when compounded over time, on low income veterans.

H.R. 4102

PVA generally supports H.R. 4102 to clarify that the estate of a deceased veteran may receive certain accrued benefits upon the death of the veteran. PVA believes that benefits which would have been due to a veteran while they were alive are owed to the veteran or to their estate.

However, PVA has concerns about singling out the estate of Shelton Hickerson for relief. While we understand the tragedy of Mr. Hickerson receiving his award on the date of his death, other veterans' families may have faced similar instances since the date of Mr. Hickerson's award who will not receive the same consideration. This issue is a simple matter of fairness. If the legislation is to be in any way retroactive, it should apply to the estates of all veterans who have died since the specified date.

H.R. 4141

PVA does not support H.R. 4141 to authorize the Secretary to enter into enhanced-use leases for excess property of the National Cemetery Administration that is unsuitable for burial purposes. PVA does not see the purpose of this legislation and is not aware of significant issues for the disposition of excess property beyond what is already covered by Section 2407 of Title 38 as it applies to monuments. Additionally, draft legislation currently pending before the Health Subcommittee authorizing medical facility projects for FY 2014 can address issues for uses such as prayer gardens or rose parks.

H.R. 4191, the "Quicker Veterans Benefits Delivery Act"

PVA supports H.R. 4191, the "Quicker Veterans Benefits Delivery Act." PVA has consistently recommended that VA accept valid medical evidence from non-Department medical professionals. The continuing actions of VA to require Department medical examinations does nothing to further efforts to reduce the claims backlog and may actually cause the backlog to increase.

Mr. Chairman, we would like to thank you once again for allowing us to address these important issues. We continue to look to VA to improve their services to veterans, but must continually caution VA that changes should provide greater care and services to veterans, and not simply increase efficiencies of processes. This is particularly true when considering those with catastrophic disabilities and complex claims.

PVA would be pleased to take any questions for the record.

Information Required by rule XI 2(g)(4) of the House of Representatives

Pursuant to Rule XI 2(g)(4) of the House of Representatives, the following information is provided regarding federal grants and contracts.

Fiscal Year 2013

National Council on Disability—Contract for Services—\$35,000.

Fiscal Year 2012

No federal grants or contracts received.

Fiscal Year 2011

Court of Appeals for Veterans Claims, administered by the Legal Services Corporation—National Veterans Legal Services Program—\$262,787.

